2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2009
Secretary of State

DOCUMENT# 587929

Entity Name: LOGISTIC SERVICES INTERNATIONAL, INC.

Current Principal Place of Business:

6200 LAKE GRAY BLVD
JACKSONVILLE, FL 322442826

New Principal Place of Business:

Current Mailing Address:

6200 LAKE GRAY BLVD
JACKSONVILLE, FL 322442826

New Mailing Address:

FEI Number: 59-1862798 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAX CO.
50 N. LAURA STREET, SUITE 3300
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ____________________

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: S/D ( ) Delete
Name: VOSS, PHIL
Address: 6200 LAKE GRAY BLVD.
City-St-Zip: JACKSONVILLE, FL 32244

Title: CEOD ( ) Delete
Name: JOHNS, CHARLES
Address: 6200 LAKE GRAY BLVD
City-St-Zip: JACKSONVILLE, FL 32244

Title: PCFO ( ) Delete
Name: ROSANDER, WARREN, S,
Address: 6200 LAKE GRAY BLVD
City-St-Zip: JACKSONVILLE, FL 32244

Title: V ( ) Delete
Name: GRIFFIN, MIKE
Address: 6200 LAKE GRAY BLVD
City-St-Zip: JACKSONVILLE, FL 32244

Title: V ( ) Delete
Name: LANGLAIS, ROY
Address: 6111 TECHNOLOGY COURT
City-St-Zip: JACKSONVILLE, FL 32221

Title: V ( ) Delete
Name: FRENCH, MIKE
Address: 6111 TECHNOLOGY CRT
City-St-Zip: JACKSONVILLE, FL 32221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WARREN ROSANDER PCFO 02/03/2009

Electronic Signature of Signing Officer or Director Date