2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 13, 2009
Secretary of State

DOCUMENT# 617809

Entity Name: DATA SYSTEMS OF NORTH FLORIDA, INC.

Current Principal Place of Business:

9485 NW 23RD PLACE
GAINESVILLE, FL 32606 US

New Principal Place of Business:

2731 SW WILLISTON ROAD
GAINESVILLE, FL 32608 US

Current Mailing Address:

P.O. BOX 12665
GAINESVILLE, FL 32604 US

New Mailing Address:

FEI Number: 59-1924151 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, STAFFORD
9485 NW 23RD PLACE
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

JONES, WILLIAM
2731 SW WILLISTON ROAD
GAINESVILLE, FL 32608 US

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: WILLIAM JONES 05/13/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: JONES, STAFFORD
Address: PO BOX 12665
City-St-Zip: GAINESVILLE, FL 32604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: JONES, WILLIAM
Address: PO BOX 12665
City-St-Zip: GAINESVILLE, FL 32604

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: WILLIAM JONES MR. 05/13/2009
Electronic Signature of Signing Officer or Director Date