

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 855548

Entity Name: I.T.S. CORPORATION

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

300 ESPLANE DR
SUITE 1450
OXNARD, CA 93030 US

Current Mailing Address:

300 ESPLANE DR
SUITE 1450
OXNARD, CA 93030 US

New Principal Place of Business:

3605 OCEAN RANCH BOULEVARD
SUITE 100
OCEANSIDE, CA 92056 US

New Mailing Address:

36 RESEARCH PARK COURT
ST. CHARLES, MO 63304 US

FEI Number: 95-3049194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND DRIVE
PLANTATION, FL 33324 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: PD () Delete
Name: SUNDLING, THOMAS
Address: 300 E. ESPLANE DR. SUITE 1450
City-St-Zip: OXNARD, CA 93036 US

Title: VD () Delete
Name: SATTERFIELD, ROSANNE
Address: 300 E. ESPLANE DR. SUITE 1450
City-St-Zip: OXNARD, CA 93036 US

Title: VDS () Delete
Name: PETER CAMBIER
Address: 300 E. ESPLANE DR. SUITE 1450
City-St-Zip: OXNARD, CA 93036 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: PETER
Address: 300 E. ESPLANE DR. SUITE 1450
City-St-Zip: OXNARD, CA 93036 US

Title: D (X) Change () Addition
Name: ANDREWS, DUANE
Address: 7918 JONES BRANCH DRIVE
City-St-Zip: MCLEAN, VA 22102 US

Title: P (X) Change () Addition
Name: MARTZ, GARRETT
Address: 890 EXPLORER BLVD
City-St-Zip: HUNTSVILLE, AL 35806 US

Title: S () Change (X) Addition
Name: FOX, DEBORAH
Address: 7918 JONES BRANCH DRIVE
City-St-Zip: MCLEAN, VA 22102 US

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: DEBORAH FOX

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04/21/2009

Electronic Signature of Signing Officer or Director

Date