2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001363

Entity Name: OVERLAND SOLUTIONS, INC.

FILED Apr 03, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
STE 400	ANDVIEW DF				
OVERLAN	ND PARK, KS	66210			
Current Mailing Address:			New Mailing Addres	ss:	
10975 GR	ANDVIEW DF	?			
STE 400	ND PARK, KS				
FEI Number	r: 45-0497543	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
1200 SOU	PORATION SY JTH PINE ISLA ION, FL 3332	AND ROAD			
	e named entity e of Florida.	submits this statement for the	e purpose of changing its register	ed office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered A	gent	Date	
Election Ca	mpaign Financii	ng Trust Fund Contribution ().			
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHANG	GES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	HANIEWICH, 10975 GRANE) Delete JEFFERY DVIEW DR # 400 ARK, KS 66210	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GREENE, DAY 10975 GRAND) Delete /ID L DVIEW DR # 400 ARK, KS 66210	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BOURK, GILB 10975 GRAND) Delete ERT III OVIEW DR # 400 ARK, KS 66210	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FERGUSON, I 10975 GRANE) Delete MICHAEL J OVIEW DR # 400 ARK, KS 66210	Title: Name: Address: City-St-Zip:	() Change () Addition	
	D () Delete	Title: Name:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KLINSKY, STE 10975 GRANE	EVE DVIEW DR # 400 ARK, KS 66210	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: GILBERT BOURK III S 04/03/2009