

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003464

Entity Name: TAPESTRY SOLUTIONS, INC.

FILED  
Jan 21, 2009  
Secretary of State

## Current Principal Place of Business:

5643 COPLEY DR.  
SAN DIEGO, CA 92111

## New Principal Place of Business:

## Current Mailing Address:

5643 COPLEY DR.  
SAN DIEGO, CA 92111

## New Mailing Address:

FEI Number: 33-0649297

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BAILEY, PHILLIP  
560 LYNN STREET  
OVEIDO, FL 32765 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: D ( ) Delete  
Name: SCHOENMAKERS, MARINUS  
Address: 11641 TREE HOLLOW LANE  
City-St-Zip: SAN DIEGO, CA 92128

Title: P ( ) Delete  
Name: ASWEGAN, GALEN D  
Address: 11983 FUERTE VISTA LANE  
City-St-Zip: EL CAJON, CA 92020

Title: VST ( ) Delete  
Name: YOUNG, MARK A  
Address: 11458 ALBORADA DRIVE  
City-St-Zip: SAN DIEGO, CA 92127

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

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change ( ) Addition  
Name: ASWEGAN, GALEN D P/D  
Address: 5643 COPLEY DRIVE  
City-St-Zip: SAN DIEGO, CA 92111

Title: MR. (X) Change ( ) Addition  
Name: ZRUST, JAMES D  
Address: 100 NORTH RIVERSIDE, M/C 5003-1001  
City-St-Zip: CHICAGO, IL 60606

Title: MR. (X) Change ( ) Addition  
Name: YOUNG, MARK A CFO/VP  
Address: 5643 COPLEY DRIVE  
City-St-Zip: SAN DIEGO, CA 92111

Title: MR. ( ) Change (X) Addition  
Name: NOONAN, TIM VP/D  
Address: P.O. BOX 513, M/CS111-1500  
City-St-Zip: ST. LOUIS, MO 63166

Title: MR. ( ) Change (X) Addition  
Name: MEERSMAN, JOHN V/P  
Address: P.O. BOX 516, M/C S100-2215  
City-St-Zip: ST. LOUIS, IL 63166

Title: MS. ( ) Change (X) Addition  
Name: MCSWEENEY, HELEN SEC.  
Address: 100 NORTH RIVERSIDE, M/C 5003-1001  
City-St-Zip: CHISAGO, IL 60606

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: MARK A. YOUNG

CFO

01/21/2009

Electronic Signature of Signing Officer or Director

Date