

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006971

FILED  
Mar 30, 2009  
Secretary of State

Entity Name: JS COMPUTER CONSULTING LIMITED, INC.

## Current Principal Place of Business:

1990 MAIN STREET, SUITE 801  
SARASOTA, FL 34236

## New Principal Place of Business:

## Current Mailing Address:

1990 MAIN STREET, SUITE 801  
SARASOTA, FL 34236

## New Mailing Address:

FEI Number: 98-0468034

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GLENDINNING, RENE M CPA  
1990 MAIN STREET, SUITE 801  
SARASOTA, FL 34236 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: CDP ( ) Delete  
Name: SLATER, JOHN  
Address: 1990 MAIN STREET, SUITE 801  
City-St-Zip: SARASOTA, FL 34236

Title: VCVP ( ) Delete  
Name: SLATER, SARAH JANE  
Address: 1990 MAIN STREET, SUITE 801  
City-St-Zip: SARASOTA, FL 34236

Title: S ( ) Delete  
Name: SLATER, SARAH JANE  
Address: 1990 MAIN STREET, SUITE 801  
City-St-Zip: SARASOTA, FL 34236

## 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:

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: SARAH JANE SLATER

S

03/30/2009

Electronic Signature of Signing Officer or Director

Date