

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 17, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # F06000002525**

1. Entity Name  
I/TX - INFORMATION TECHNOLOGY SOLUTIONS, INC.



Principal Place of Business  
26415 212TH AVE.  
DELHI, IA 52223

Mailing Address  
26415 212TH AVE.  
DELHI, IA 52223



01052007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
86-0818162

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

CURRY, WILLIAM  
8257 TIVOLI DR.  
ORLANDO, FL 32836

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent, and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

U00000588548  
01/17/07-80078-011 150.00

**10. OFFICERS AND DIRECTORS**

TITLE P  
NAME BARNETT, ROBERT  
STREET ADDRESS 20872 262ND ST.  
CITY-ST-ZIP DELHI, IA 52223

TITLE D  
NAME DYER, JAMES D  
STREET ADDRESS 11586 N. 120TH ST.  
CITY-ST-ZIP SCOTTSDALE, AZ 85259

TITLE D  
NAME DYER, JOY  
STREET ADDRESS 11586 N. 120TH ST.  
CITY-ST-ZIP SCOTTSDALE, AZ 85259

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Robert J. Barnett*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #