# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 29, 2009**
**Secretary of State**

DOCUMENT# F07000002395

**Entity Name:** FM:SYSTEMS, INC. N.C.

**Current Principal Place of Business:**

4515 FALLS OF NEUSE RD., STE. 420
RALEIGH, NC 27609

**New Principal Place of Business:**

4515 FALLS OF NEUSE RD., STE. 420
RALEIGH, NC 27609 US

**Current Mailing Address:**

4515 FALLS OF NEUSE RD., STE. 420
RALEIGH, NC 27609

**New Mailing Address:**

4515 FALLS OF NEUSE RD., STE. 420
RALEIGH, NC 27609 US

**FEI Number: 56-1905175** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
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: P ( ) Delete
Name: SCHLEY, MICHAEL
Address: 10116 PERIDOT LANE
City-St-Zip: RALEIGH, NC 27615

Title: S ( ) Delete
Name: SCHLEY, KAREN
Address: 10116 PERIDOT LANE
City-St-Zip: RALEIGH, NC 27615

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: MICHAEL
Address: 10116 PERIDOT LANE RALEIGH NC 27615
City-St-Zip: RALEIGH, NC 27615 US

Title: S (X) Change ( ) Addition
Name: KAREN
Address: 10116 PERIDOT LANE RALEIGH NC 27615
City-St-Zip: RALEIGH, NC 27615 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: MICHAEL SCHLEY P 04/29/2009

Electronic Signature of Signing Officer or Director — Date