## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F08000002771

Entity Name: PC CONSULTING, INC.

FILED Jan 06, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	300 NORTH E, UT 84037				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	300 NORTH E, UT 84037				
FEI Number:	87-0515023	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
	MICHELLE JRES DRIVE , FL 32819	SUITE 21B US			
The above in the State		submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Carr	npaign Financin	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	CP ( JONES, TIMO 1655 ANGELS KAYSVILLE, U	WAY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V ( GARDNER, QU 1017 WOODM BOUNTIFUL, U	IOOR DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( RICE, ALLEN 438 ROSEWO LAYTON, UT 8		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( LEISHMAN, LO 1189 EAST 16 BOUNTIFUL, U	OWELL L 50 SOUTH	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-7in:	S ( LUNDQUIST, F 1630 ANGELS KAYSVILLE LI	WAY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: RICHARD N. LUNDQUIST CFO 01/06/2009