## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F08000002983

Entity Name: CARDINAL INVESTMENT SERVICES, INC.

FILED Feb 04, 2009 Secretary of State

Current Pr	incipal Place	e of Business:	New Prince	New Principal Place of Business:			
	JNCIATION C A, FL 34142	RCLE STE 317					
Current Mailing Address:			New Maili	New Mailing Address:			
114 ANN LEE ROAD HARVARD, MA 01451			5072 ANNUNCIATION CIRCLE STE 317 AVE MARIA, FL 34142				
FEI Number:	04-3391257	FEI Number Applied For()	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )		
Name and	Address of (	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
WILLIAMS, 3968 UPOL NAPLES, F	O LANE	JS					
The above in the State		submits this statement for the p	urpose of changing i	ts registered o	office or registered agent, or both	,	
SIGNATUR	RE:						
		nic Signature of Registered Age	nt		Date	-	
Election Carr	npaign Financin	g Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip: Title:	WILLIAMS, CH 114 ANN LEE I HARVARD, MA	ROAD	Title: Name: Address: City-St-Zip: Title:	WILLIAMS, CH 5072 ANNUNC AVE MARIA, FI	C) Change ( ) Addition IRISTOPHER Y IATION CIRCLE, STE. 317  2 34142 ) Change ( ) Addition		
Name: Address: City-St-Zip:	WILLIAMS, JO 5 VIOLET CIRC SHREWSBUR	SEPH C CLE	Name: Address: City-St-Zip:	(	, onlinge ( ) / dditton		
Title: Name: Address: City-St-Zip:	T ( WILLIAMS, JO 5 VIOLET CIRC SHREWSBURY	CLE	Title: Name: Address: City-St-Zip:	(	) Change()Addition		
Title: Name: Address: City-St-Zip:	D ( WILLIAMS, DA 3968 UPOLO L NAPLES, FL 3	ANE	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: CHRISTOPHER Y. WILLIAMS PRES 02/04/2009