

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004810

FILED
Apr 29, 2009
Secretary of State

Entity Name: INNOVATION & INFORMATION CONSULTANTS, INC.

Current Principal Place of Business:

72 JUNCTION SQUARE DRIVE
CONCORD, MA 01742

New Principal Place of Business:

Current Mailing Address:

72 JUNCTION SQUARE DRIVE
CONCORD, MA 01742

New Mailing Address:

FEI Number: 04-2840411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UPTON, LEE O III
1591 LAKE BALDWIN LANE
UNIT B
ORLANDO, FL 32814 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: CHRM () Delete
Name: ASHTON, PETER K
Address: 1 OLDE BARN WAY
City-St-Zip: CONCORD, MA 01742

Title: P () Delete
Name: ASHTON, PETER K
Address: 1 OLDE BARN WAY
City-St-Zip: CONCORD, MA 01742

Title: VCHR () Delete
Name: BUESCHER ASHTON, MARY ANN
Address: 1 OLDE BARN WAY
City-St-Zip: CONCORD, MA 01742

Title: ST () Delete
Name: BUESCHER ASHTON, MARY ANN
Address: 1 OLDE BARN WAY
City-St-Zip: CONCORD, MA 01742

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:

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: MARY ANN BUESCHER ASHTON

VCHR

04/29/2009

Electronic Signature of Signing Officer or Director

Date