

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000005009

Entity Name: ITC2, INC.

FILED
Jun 26, 2009
Secretary of State

Current Principal Place of Business:

5310 LEXINGTON WOODS LANE
JOHNS CREEK, GA 30005

New Principal Place of Business:

Current Mailing Address:

5310 LEXINGTON WOODS LANE
JOHNS CREEK, GA 30005

New Mailing Address:

FEI Number: 20-5776248

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES INC.
2731 EXECUTIVE PARK DRIVE
WESTON, FL 33331 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CDP () Delete
Name: PETERSON, LESLIE
Address: 5310 LEXINGTON WOODS LANE
City-St-Zip: JOHNS CREEK, GA 30005

Title: D (X) Delete
Name: PETERSON, KEVIN
Address: 232 JACKIES TERRACE
City-St-Zip: MADISON, AL 357587703

Title: ST () Delete
Name: PETERSON, AUDRA
Address: 5310 LEXINGTON WOODS LANE
City-St-Zip: JOHNS CREEK, GA 30005

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:

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: LESLIE PETERSON

CDP

06/26/2009

Electronic Signature of Signing Officer or Director

Date