2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2011
Secretary of State

DOCUMENT# F09000003145

Entity Name: MODULAR SOLUTIONS, INC.

Current Principal Place of Business:

2488 OLD POOLE RD.
KINSTON, NC 28501

New Principal Place of Business:

Current Mailing Address:

PO BOX 6115
KINSTON, NC 28501

New Mailing Address:

FEI Number: 56-2255158 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROWN, DAVID S
6015 MORROW ST. EAST SUITE 109
JACKSONVILLE, FL 32217 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

OFFICERS AND DIRECTORS:

Title: PC
Name: ROUSE, ALICE S
Address: PO BOX 6115
City-St-Zip: KINSTON, NC 28501

Title: VPST
Name: ROUSE, ERIC S
Address: PO BOX 6115
City-St-Zip: KINSTON, NC 28501

Title: VC
Name: ROUSE, ERIC S
Address: PO BOX 6115
City-St-Zip: KINSTON, NC 28501

Title: D
Name: ROUSE, WILLIAM H JR
Address: PO BOX 6115
City-St-Zip: KINSTON, NC 28501

Title: D
Name: ROUSE, RICHARD W
Address: PO BOX 6115
City-St-Zip: KINSTON, NC 28501

I hereby 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 all other like empowered.

SIGNATURE: ALICE S. ROUSE PRES 01/04/2011

Electronic Signature of Signing Officer or Director Date