## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F39035

Entity Name: DATA FLOW SYSTEMS, INC.

FILED Mar 01, 2011 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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605 N. JOHN RODES BLVD. MELBOURNE, FL 32934

Current Mailing Address: New Mailing Address:

605 N. JOHN RODES BLVD. MELBOURNE, FL 32934

FEI Number: 59-2103644 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:

SMAIDRIS, THOMAS F 3568 CAPPIO DR.

MELBOURNE, FL 32940 US

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

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

Title: VP

Name: SAUNDERS, ROGER B.
Address: 8589 S. TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL 32952

Title: PTS

Name: SMAIDRIS, THOMAS F Address: 3568 CAPPIO DR. City-St-Zip: MELBOURNE, FL 32940

Title: D

Name: SMAIDRIS, GLORIA A Address: 3568 CAPPIO DR. City-St-Zip: MELBOURNE, FL 32940

Title: [

 Name:
 SAUNDERS, LAURIE

 Address:
 8589 S. TROPICAL TRAIL

 City-St-Zip:
 MERRIT ISLAND, FL 32952

Title: [

Name: WHITLOCK, STEPHEN D.
Address: 164 DELAND AVENUE
City-St-Zip: INDIALANTIC, FL

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: THOMAS F SMAIDRIS PRES 03/01/2011