2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F56988

FILED Mar 05, 2009 Secretary of State

Entity Name: INFORMATION AND DISPLAY SYSTEMS, INC.

Current Principal Place of Business:		New Principal Place of Business:
10275 CENTURION CT JACKSONVILLE, FL 32256	US	

Current Mailing Address:

New Mailing Address:

10275 CENTURION COURT JACKSONVILLE, FL 32256 US

FEI Number: 59-2159264 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:

HARNEK, RON CFO 10275 CENTURION CT. JACKSONVILLE, FL 32256 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VSD () Delete Title: VSD (X) Change () Addition Name: MINCEK, Z., Name: MINCEK, Z.

Address: 14 PONTE VEDRA CIRCLE
City-St-Zip: PONTE VEDRA BEACH, FL 32082
Address: 14 PONTE VEDRA CIRCLE
City-St-Zip: PONTE VEDRA BEACH, FL 32082
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VTD () Delete Title: VTD (X) Change () Addition Name: INGALLS, JAMES W., Name: INGALLS, JAMES W

Address: 934 PONTE VEDRA BLVD. Address: 934 PONTE VEDRA BLVD.

City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 PAPPAS, RALLIS L.,
 Name:
 PAPPAS, RALLIS L

 Address:
 93 OCEANSIDE DR
 Address:
 93 OCEANSIDE DR

 City-St-Zip:
 ATLANTIC BEACH, FL 32233
 City-St-Zip:
 ATLANTIC BEACH, FL 32233

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: RALLIS L. PAPPAS P 03/05/2009