2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000002067

Entity Name: TRANSPORTATION SYSTEMS CONSULTING CORPORATION

FILED Feb 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1019 OHIO AVENUE 2451 MCMULLEN BOOTH RD PALM HARBOR, FL 34683 US

SUITE 243

CLEARWATER, FL 33759

Current Mailing Address: New Mailing Address:

1019 OHIO AVENUE 2451 MCMULLEN BOOTH RD

PALM HARBOR, FL 34683 US SUITE 243

CLEARWATER, FL 33759

FEI Number: 11-2533652 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:

ANDREWS, PAUL G ANDREWS, INGE M 3043 ENISGROVE DRIVE E 2961 SHANNON CIRCLE PALM HARBOR, FL 34684 US US PALM HARBOR, FL 34683

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: INGE M ANDREWS 02/19/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

() Delete

OFFICERS AND DIRECTORS:

Title:

Title: (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

ANDREWS, PAUL G ANDREWS, PAUL G Name: Name: 2961 SHANNON CIRCLE 2961 SHANNON CIRCLE Address: Address: City-St-Zip: PALM HARBOR, FL 34684 US City-St-Zip: PALM HARBOR, FL 34684 US

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

Name: ANDREWS, INGE M. Name: ANDREWS, INGE M 3043 ENISGROVE DR. EAST Address: 3043 ENISGROVE DR. EAST Address: PALM HARBOR, FL 34683 US PALM HARBOR, FL 34683 US City-St-Zip: 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: INGE M ANDREWS SCT 02/19/2009