

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000003716

Entity Name: COM-NET SERVICES, INC.

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

8183 W. EL CAJON DR
BATON ROUGE, LA 70815

New Principal Place of Business:

Current Mailing Address:

8183 W. EL CAJON
BATON ROUGE, LA 70815

New Mailing Address:

8183 W. EL CAJON DR
BATON ROUGE, LA 70815

FEI Number: 72-1393331

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
% CT CORPORATION SYSTEM
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: PHILLIPS, N. LARON
Address: 8183 W. EL CAJON
City-St-Zip: BATON ROUGE, LA 70815

Title: PRES () Delete
Name: RUSH, J. JAY
Address: 12740 TRIPLE B RD.
City-St-Zip: GREENWELL SPRINGS, LA 70739

Title: DIR () Delete
Name: THOMAS, NEWTON B
Address: 12860 SPRINGVIEW AVE
City-St-Zip: BATON ROUGE, LA 70810

Title: SEC () Delete
Name: MISURACA, TAMI
Address: 10224 SHOE CREEK DRIVE
City-St-Zip: BATON ROUGE, LA 70818

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:

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: TAMI MISURACA

SEC

04/20/2009

Electronic Signature of Signing Officer or Director

_____ Date