

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002042

FILED  
Apr 07, 2009  
Secretary of State

Entity Name: SMS SYSTEMS MAINTENANCE SERVICES, INC.

## Current Principal Place of Business:

455 RIVER ROAD  
HUDSON, MA 01749

## New Principal Place of Business:

9013-E PERIMETER WOODS DRIVE  
CHARLOTTE, NC 28216

## Current Mailing Address:

9013-E PERIMETER WOODS DR  
CHARLOTTE, NC 28216

## New Mailing Address:

9013-E PERIMETER WOODS DRIVE  
CHARLOTTE, NC 28216

FEI Number: 04-2779058

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MARTIN, MARSHA  
5925 IMPERIAL PKWY, STE 126  
MULBERRY, FL 33860 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: P ( ) Delete  
Name: SCORDINO, JOSEPH  
Address: 3715 HEDLECCLIFF CT  
City-St-Zip: ALPHARETTA, GA 30022

Title: CEO ( ) Delete  
Name: DOCTOR, DON  
Address: 512 MAYMONT DR  
City-St-Zip: CRAMERTON, NC 28032

Title: CFO ( ) Delete  
Name: FAVORY, STEVE  
Address: 12131 CHATSWORTH CT  
City-St-Zip: CHARLOTTE, NC 28277

Title: DS ( ) Delete  
Name: COWIE, JAMIE  
Address: 222 CUMBERWOOD AVE  
City-St-Zip: KENILWORTH, IL 60043

## 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: STEVEN K. FAVORY

CFO

04/07/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date