

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H31363

FILED  
Jan 04, 2010  
Secretary of State

**Entity Name:** INTEGRATED CONTROL SYSTEMS, INC.

**Current Principal Place of Business:**

955 WEST RETTA ESPLANADE  
PUNTA GORDA, FL 33950 US

**New Principal Place of Business:**

**Current Mailing Address:**

HEATHER RUMBOLD  
900 WEST MARION AVE.  
PUNTA GORDA, FL 33950 US

**New Mailing Address:**

KATHLEEN OTOOLE  
900 WEST MARION AVE.  
PUNTA GORDA, FL 33950 US

**FEI Number:** 58-1787342

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROSS, WARREN R  
223 TAYLOR ST,  
PUNTA GORDA, FL 33950 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: PD  
Name: JACOBSON, ROBERT A  
Address: C/O 955 W RETTA ESPLANADE  
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: STD  
Name: JACOBSON, ROBERT A  
Address: C/O 955 W RETTA ESPLANADE  
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: D  
Name: O'TOOLE, KATHLEEN M  
Address: BOX 512220  
City-St-Zip: PUNTA GORDA, FL 33951 US

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:** KATHLEEN M. O'TOOLE

D

01/04/2010

Electronic Signature of Signing Officer or Director

Date