

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H83551

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: FORMS AND SYSTEMS CONSULTANTS, INC.

## Current Principal Place of Business:

5479 SCOTT VIEW LANE  
P.O. BOX 5413  
LAKELAND, FL 338072413

## New Principal Place of Business:

5479 SCOTTVIEW LANE  
LAKELAND, FL 338133064 US

## Current Mailing Address:

5479 SCOTT VIEW LANE  
P.O. BOX 5413  
LAKELAND, FL 338072413

## New Mailing Address:

5479 SCOTTVIEW LANE  
LAKELAND, FL 338133064 US

FEI Number: 59-2597062

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WOMBLES, JOHN  
5479 SCOTTVIEW LANE  
LAKELAND, FL 33813 US

## Name and Address of New Registered Agent:

WOMBLES, JOHN  
5479 SCOTTVIEW LANE  
LAKELAND, FL 338133064 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: JOHN E. WOMBLES

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: WOMBLES, JOHN  
Address: 5479 SCOTTVIEW LANE  
City-St-Zip: LAKELAND, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: WOMBLES, JOHN  
Address: 5479 SCOTTVIEW LANE  
City-St-Zip: LAKELAND, FL 338133064 US

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: JOHN E. WOMBLES

PRES

04/28/2009

Electronic Signature of Signing Officer or Director

Date