2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J11517

FILED Apr 07, 2009 Secretary of State

Entity Name: COMPUTER RESOURCE SERVICE, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
458 CITRU MAITLANI	JS LN D, FL 32751	US		
Current M	lailing Addre	ess:	New Mailing Address	s:
458 CITRU MAITLANI	JS LN D, FL 32751	US		
FEI Number	: 59-2701556	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
FOX, JOY				
458 ĆITRU MAITLANI The above	JS LN D, FL 32751 e named entity	US submits this statement for the	purpose of changing its registered	d office or registered agent, or both,
458 CITRUMAITLAND The above in the State	JS LN D, FL 32751 e named entity e of Florida.		purpose of changing its registered	d office or registered agent, or both,
458 ĆITRU MAITLANI The above	JS LN D, FL 32751 e named entity e of Florida. RE:			d office or registered agent, or both, Date
458 CITRUMAITLAND The above in the State SIGNATU	JS LN D, FL 32751 e named entity e of Florida. RE: Electro	submits this statement for the		
458 CITRUMAITLAND The above in the State SIGNATUE	JS LN D, FL 32751 e named entity e of Florida. RE: Electro	submits this statement for the nic Signature of Registered Ag	ent	
458 CITRUMAITLAND The above in the State SIGNATUE	JS LN D, FL 32751 e named entity e of Florida. RE: Electro mpaign Financi	submits this statement for the onic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete	ent	Date

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: JOYCE FOX TDS 04/07/2009