

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J50070

FILED  
Jan 04, 2007  
Secretary of State

Entity Name: TECHNICAL SYSTEMS INTEGRATORS, INC.

## Current Principal Place of Business:

101 SUNNYTOWN RD  
300  
CASSELBERRY, FL 32707 US

## Current Mailing Address:

101 SUNNYTOWN RD  
300  
CASSELBERRY, FL 32707 US

## New Principal Place of Business:

500 WINDERLEY PLACE  
108  
MAITLAND, FL 32751 US

## New Mailing Address:

500 WINDERLEY PLACE  
108  
MAITLAND, FL 32751 US

FEI Number: 59-2771158

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REYNOLDS, CHARLES T C  
1232 WELLINGTON TERRACE  
MAITLAND, FL 32751 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: C ( ) Delete  
Name: REYNOLDS, CHARLES T.,  
Address: 101 SUNNYTOWN ROAD, SUITE 300  
City-St-Zip: CASSELBERRY, FL 32707

Title: P ( ) Delete  
Name: CONLEY, GREGORY S.,  
Address: 101 SUNNYTOWN ROAD, SUITE 300  
City-St-Zip: CASSELBERRY, FL 32707

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change ( ) Addition  
Name: REYNOLDS, CHARLES T.,  
Address: 500 WINDERLEY PLACE  
City-St-Zip: MAITLAND, FL 32751

Title: P (X) Change ( ) Addition  
Name: CONLEY, GREGORY S.,  
Address: 500 WINDERLEY PLACE  
City-St-Zip: MAITLAND, FL 32751

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES T REYNOLDS

COB

01/04/2007

Electronic Signature of Signing Officer or Director

Date