

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J99465

Entity Name: TECH SOURCE, INC.

FILED
Feb 24, 2009
Secretary of State

Current Principal Place of Business:

442 NORTHLAKE BLVD.
#1008
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

442 NORTHLAKE BLVD.
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

FEI Number: 59-2860843

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOPER, SUSAN D
132 SABAL PALM CT.
SANFORD, FL 32773 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: DP () Delete
Name: HENRIQUES, SELWYN L
Address: 442 NORTHLAKE BLVD.
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: T () Delete
Name: COOPER, SUSAN D
Address: 442 NORTHLAKE BLVD.
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: DS () Delete
Name: ARISE, MANABU
Address: 5710 WARLAND DRIVE
City-St-Zip: CYPRESS, CA 90630

Title: D () Delete
Name: WALETZKI, THOMAS J
Address: 5710 WARLAND DRIVE
City-St-Zip: CYPRESS, CA 90630

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: SUSAN D. COOPER

CFO

02/24/2009

Electronic Signature of Signing Officer or Director

Date