## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# L70337

FILED Feb 14, 2008 Secretary of State

Entity Name: ANDERSON COMPUTER SERVICES, INC.

rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
LEN PL				
WA 98103	US			
ailing Addre	ess:	New Mailing Address	<b>::</b>	
LEN PL.				
WA 98103	US			
65-0192012	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:	
LEN PL FL 98103 U named entity		ourpose of changing its registered	d office or registered agent, or both,	
RE:				
RE:Electro	onic Signature of Registered Ag	ent	 Date	
Electro	onic Signature of Registered Agong Trust Fund Contribution ( ).	ent	Date	
Electro	ng Trust Fund Contribution().		Date ES TO OFFICERS AND DIRECTORS:	
Electro	ng Trust Fund Contribution ( ).  CTORS:  ) Delete  CLAIRE  N PL APT 136	ADDITIONS/CHANGE	<del></del>	
	LEN PL. WA 98103 : 65-0192012 I Address of DN CLAIRE LEN PL FL 98103 U	WA 98103 US  lailing Address:  LEN PL.  WA 98103 US  65-0192012 FEI Number Applied For ( )  I Address of Current Registered Agent:  DN CLAIRE  LEN PL  FL 98103 US  named entity submits this statement for the process of the statement of	WA 98103 US  lailing Address:  New Mailing Address  LEN PL.  WA 98103 US  65-0192012 FEI Number Applied For ( ) FEI Number Not Applicable ( )  I Address of Current Registered Agent:  Name and Address of Current Registered Agent:  PL 98103 US  named entity submits this statement for the purpose of changing its registered	

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: CLAIRE ANDERSON PRES 02/14/2008