

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001936

FILED
May 01, 2009
Secretary of State

Entity Name: INNOVATIVE TECHNOLOGY SOLUTIONS, INC.

Current Principal Place of Business:

2070 SW. SAVAGE BLVD.
PORT SAINT LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1881476
PORT SAINT LUCIE, FL 34953

New Mailing Address:

FEI Number: 26-2046954 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CALHOUN, ROBERT J JR
2070 SW SAVAGE BLVD
PORT SAINT LUCIE, FL 34953 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CALHOUN, ROBERT J JR
Address: 2070 SW. SAVAGE BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: VP () Delete
Name: CALHOUN, GLADYS D
Address: 2070 SW. SAVAGE BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT JAMES CALHOUN

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date