

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000009129

FILED
Apr 28, 2010
Secretary of State

Entity Name: LOOSE ENDS CONSULTING INC.

Current Principal Place of Business:

1800 MICCOSUKEE COMMONS APRT. 402
TALLAHASSEE, FL 32308

New Principal Place of Business:

1800 MICCOSUKEE COMMONS DR.
#402
TALLAHASSEE, FL 32308

Current Mailing Address:

1800 MICCOSUKEE COMMONS APRT. 402
TALLAHASSEE, FL 32308

New Mailing Address:

1800 MICCOSUKEE COMMONS DR.
#402
TALLAHASSEE, FL 32308

FEI Number: 27-0862957

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GERLACH, RACHEL
1800 MICCOSUKEE COMMONS APRT. 402
TALLAHASSEE, FL 32308 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

OFFICERS AND DIRECTORS:

Title: PD
Name: JESSUP, MARGIE
Address: 8215 GREENMONT AVE.
City-St-Zip: TALLAHASSEE, FL 32317

Title: VPD
Name: GALLON, BESSIE
Address: 1171 BARNES RD.
City-St-Zip: MONTICELLO, FL 32344

Title: SD
Name: WRIGHT, GARY C
Address: 2729 W. PENSUCOLA ST.
City-St-Zip: TALLAHASSEE, FL 32304

Title: TD
Name: OSSIE, SCOTT
Address: 2016 S. MAGNOLIA DR.
City-St-Zip: TALLAHASSEE, FL 32301

Title: D
Name: WILLIAMS, CYNTHIA
Address: 4208 LEAFSTONE DR.
City-St-Zip: COVINGTON, GA 30014

I hereby 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 all other like empowered.

SIGNATURE: GARY C. WRIGHT

SD

04/28/2010

Electronic Signature of Signing Officer or Director

Date