2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2008 08:00 AM Secretary of State

					Convoto	very of Cto
DOCUMENT # P0000000252 1. Enlity Name STEPHEN C. MOOSE INFORMATION TECHNOLOGIES, INC.					secreta	ıry of Sta
C/O STEPHEN C. MOOSE C/ 321 S SECOND ST 33	ailing Address /O STEPHEN C. MOOSE 21 S SECOND ST T PIERCE, FL 34950			18 11: 21 111 22 111 18 111 83 11		JJ; ANNE NIKETI NI 748
DO NOT WRITE IN THIS SPA		CE	04182008 No Chg-P CR2E034 (11/05) 4. FEI Number			
MOOSE, STEPHEN C 321 S SECOND ST FT PIERCE, FL 34950				NOT W THIS SP		
8. The above named entity submits this statement for the purpose of changing its registered of the obligations of registered agent SIGNATURE Signature typed or punted name of registered agent and trills if applicable (NOTE: Registered Agent and trills if applicable FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution.				h, in the State of Flo	orda. I am famil DATE	iar with, and accept
10. OFFICERS AND DIRECT TILLE NAME NAME MOOSE, STEPHEN C 321 S SECOND ST FT PIERCE, FL 34950 TILLE NAME SIREET ADDRESS CITY-SI-ZIP TILLE NAME STREET ADDRESS CITY-SI-ZIP TILLE NAME STREET ADDRESS CITY-SI-ZIP TILLE NAME STREET ADDRESS CITY-SI-ZIP TILLE NAME	CTORS			U0000 05/23/08 NOT W	'RITE	14 150.00
NAME CYPEET ADDRESS A						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 📈

CITY-ST-ZIP

into Co Moor Stephen C Mongo

4/29/08

772-465-5500

Daytime Phone #