2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000038883

Entity Name: FASCOMP, INC.

FILED Feb 19, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

7814 KINGSPONINTE PKWY 7814 KINGSPOINTE PARKWAY

ORLANDO, FL 32835 ORLANDO, FL 32819

Current Mailing Address: New Mailing Address:

7814 KINGSPONINTE PKWY 7814 KINGSPOINTE PARKWAY

ORLANDO, FL 32835 ORLANDO, FL 32819

FEI Number: 59-3641811 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BERTONE, JASON
325 LAKE AMBERLEIGH DR
WINTER GARDENS, FL 34737 US
BERTONE, JASON
9131 PANZANI PLACE
WINDERMERE, FL 34786 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: JASON BERTONE 02/19/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:D() DeleteTitle:D(X) Change () AdditionName:BERTONE, JASONName:BERTONE, JASONAddress:325 LAKE AMBERLEIGH DRAddress:9131 PANZANI PLACE

City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: WINDERMERE, FL 34786

Title: Title: (X) Change () Addition () Delete GEORGIA, MARK GEORGIA, BRIAN Name: Name: 7814 KINGSPOWTE PKWY 577 SKOKORAT ROAD Address: Address: ORLANDO, FL 32835 BEACON FALLS, CT 06403 City-St-Zip: City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 GEORCIA, MARK
 Name:

 Address:
 BL JONES RD
 Address:

 City-St-Zip:
 BEACON FALLS, CT 06403
 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: JASON BERTONE D 02/19/2009