

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000068463

**FILED**  
**Mar 29, 2010**  
**Secretary of State**

**Entity Name:** OFFICE AUTOMATION CONSULTING, INC.

**Current Principal Place of Business:**

8107 MACTAVISH WAY, E  
JACKSONVILLE, FL 32244

**New Principal Place of Business:**

**Current Mailing Address:**

8107 MACTAVISH WAY, E  
JACKSONVILLE, FL 32244

**New Mailing Address:**

FEI Number: 59-3659870

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TWIGGS, ARMAND T P  
8107 MACTAVISH WAY, E  
JACKSONVILLE, FL 32244 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: TWIGGS, ARMAND  
Address: 8107 MACTAVISH WAY, E  
City-St-Zip: JACKSONVILLE, FL 32244

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

SIGNATURE: ARMAND TWIGGS

P

03/29/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date