## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000084202

**Entity Name:** MATRIX DATA SOLUTIONS, INC.

FILED Mar 27, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 701 RIVERSIDE PARK PLACE SUITE 310 JACKSONVILLE, FL 32204 **New Mailing Address: Current Mailing Address:** 701 RIVERSIDE PARK PLACE SUITE 310 JACKSONVILLE, FL 32204 US FEI Number: 59-3669433 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: WIKER, PAMELA L 701 RIVERSIDE PARK PLACE SUITE 310 JACKSONVILLE, FL 32204 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition GRAHAM, JR., HENRY H JR GRAHAM, JR., HENRY H JR Name: Name: 701 RIVERSIDE PARK PLACE, SUITE 310 701 RIVERSIDE PARK PLACE, SUITE 310 Address: Address: City-St-Zip: JACKSONVILLE, FL 32204 US City-St-Zip: JACKSONVILLE, FL 32204 US P/D ( ) Delete Title: (X) Change ( ) Addition Title: Name: HODGES, DAVID C JR. Name: HODGES, DAVID C JR. 701 RIVERSIDE PARK PLACE, SUITE 310 701 RIVERSIDE PARK PLACE, SUITE 310 Address: Address: JACKSONVILLE, FL 32204 US JACKSONVILLE, FL 32204 US City-St-Zip: City-St-Zip: Title: Title: T/S () Delete () Change () Addition CURRY, JEFFERY S Name: Name: 701 RIVERSIDE PARK PLACE, SUITE 310 Address: Address: City-St-Zip: JACKSONVILLE, FL 32204 US City-St-Zip: Title: S/D () Delete Title: (X) Change ( ) Addition MATHENY, JR., LAWRENCE M JR MATHENY, JR., LAWRENCE M JR Name: Name: Address: 701 RIVERSIDE PARK PLACE, SUITE 310 Address: 701 RIVERSIDE PARK PLACE, SUITE 310 City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32204 US JACKSONVILLE, FL 32204 US Title: Title: ( ) Delete () Change () Addition LONG, WILLIAM A Name: Name: 11000 NORTH FLORIDA AVENUE Address: Address:

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.

City-St-Zip:

SIGNATURE: HENRY H. GRAHAM, JR. D 03/27/2008

City-St-Zip:

TAMPA, FL 33612 US