

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000032374

FILED
Jan 21, 2008
Secretary of State

Entity Name: BIT-WIZARDS INFORMATION TECHNOLOGY SOLUTIONS, INC.

Current Principal Place of Business:

189 EGLIN PKWY NE
2ND FLOOR, SUITE 201
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

PO BOX 937
FT WALTON BEACH, FL 32549

New Mailing Address:

FEI Number: 59-3709381

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLEET, H BART
FLEET, SPENCER, MARTIN & KILPATRICK, PA
1104 EGLIN PARKWAY
SHALIMAR, FL 325790000 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, S () Delete
Name: MAYFIELD, VINCENT W
Address: 75 7TH AVE
City-St-Zip: SHALIMAR, FL 32579

Title: V, T () Delete
Name: ERICKSON, LOUIS J JR
Address: PO BOX 1493
City-St-Zip: FT WALTON BEACH, FL 32549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: VINCENT W. MAYFIELD

P

01/21/2008

Electronic Signature of Signing Officer or Director

Date