

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000042446

FILED
Apr 14, 2009
Secretary of State

Entity Name: SPACE COAST CONSULTING, INC.

Current Principal Place of Business:

2295 S HIAWASSEE ROAD
SUITE 408
ORLANDO, FL 32835 US

New Principal Place of Business:

Current Mailing Address:

2295 S HIAWASSEE ROAD
SUITE 408
ORLANDO, FL 32835 US

New Mailing Address:

FEI Number: 59-3722639

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELGRAM, WENZEL
12843 BUTLER BAY COURT
WINDERMERE, FL 34786 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: CP () Delete
Name: BELGRAM, WENZEL PRES
Address: 12843 BUTLER BAY COURT
City-St-Zip: WINDERMERE, FL 34786

Title: S () Delete
Name: BELGRAM, GAYLE K SEC
Address: 12843 BUTLER BAY CT
City-St-Zip: WINDERMERE, FL 34786

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T () Change (X) Addition
Name: BELGRAM, BLAKE
Address: 1650 PORTCASTLE CIRCLE
City-St-Zip: WINTER GARDEN, F 34768

Title: VP () Change (X) Addition
Name: BELGRAM, GRANT
Address: 11821 SHELTERING PINE DRIVE
City-St-Zip: ORLANDO, F 32835

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: WENZEL BELGRAM

CP

04/14/2009

Electronic Signature of Signing Officer or Director

Date