2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# P02000120473

Entity Name: IT JUNCTION, INC.

Current Principal Place of Business:

7631 BLUE SPRING DRIVE
LAND O LAKES, FL 34637 US

New Principal Place of Business:

Current Mailing Address:

7631 BLUE SPRING DRIVE
LAND O LAKES, FL 34637 US

New Mailing Address:

FEI Number: 04-3721994 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VAN WYK, DONNA
7631 BLUE SPRING DRIVE
LAND O LAKES, FL 34637 US

Name and Address of New Registered Agent:

VAN WYK, DONNA J MRS
7631 BLUE SPRING DRIVE
LAND O LAKES, FL 34637 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: DONNA VAN WYK 03/27/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: VAN WYK, DONNA
Address: 7631 BLUE SPRING DRIVE
City-St-Zip: LAND O LAKES, FL 34637 US

Title: V ( ) Delete
Name: VAN WYK, LEON
Address: 7631 BLUE SPRING DRIVE
City-St-Zip: LAND O LAKES, FL 34637 US

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: VAN WYK, DONNA J MRS
Address: 7631 BLUE SPRING DRIVE
City-St-Zip: LAND O LAKES, FL 34637 US

Title: V (X) Change ( ) Addition
Name: VAN WYK, LEON MR
Address: 7631 BLUE SPRING DRIVE
City-St-Zip: LAND O LAKES, FL 34637 US

Title: P ( ) Change (X) Addition
Name: VAN WYK, DONNA J MRS
Address: 3043 NW 46TH AVE
City-St-Zip: CAMAS, WA 98607 US

Title: 3043 ( ) Change (X) Addition
Name: VAN WYK, LEON MR
Address: 3043 NW 46TH AVE
City-St-Zip: CAMAS, WA 98607 US

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: LEON VAN WYK LEON 03/27/2009
Electronic Signature of Signing Officer or Director Date