

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000120473

Entity Name: IT JUNCTION, INC.

FILED
Apr 25, 2011
Secretary of State

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 J MRS
7631 BLUE SPRING DRIVE
LAND O LAKES, FL 34637 US

Name and Address of New Registered Agent:

VAN WYK, LEON L MR
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: LEON VAN WYK

04/25/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

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

Title: V
Name: VAN WYK, LEON L MR
Address: 3043 NW 46TH AVE
City-St-Zip: CAMAS, WA 98607 US

Title: V
Name: VAN WYK, DONNA J MRS
Address: 3043 NW 46TH AVE
City-St-Zip: CAMAS, WA 98607 US

Title: V
Name: VAN WYK, LEON L MR
Address: 3043 NW 46TH AVE
City-St-Zip: CAMAS, WA 98607 US

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: LEON VAN WYK

V

04/25/2011

Electronic Signature of Signing Officer or Director

Date