

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000157083

Entity Name: TOM SULLIVAN CONSULTING, INC.

FILED
Apr 06, 2009
Secretary of State

Current Principal Place of Business:

15 FORGE LANE
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

15 FORGE LANE
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 20-0524633

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLIVAN, TOM
15 FORGE LANE
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

SULLIVAN, THOMAS A
15 FORGE LANE
PALM COAST, FL 32137 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: THOMAS A. SULLIVAN

04/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTS () Delete
Name: SULLIVAN, TOM
Address: 15 FORGE LANE
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: SULLIVAN, THOMAS A
Address: 15 FORGE LANE
City-St-Zip: PALM COAST, FL 32137

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: THOMAS A. SULLIVAN

PTS

04/06/2009

Electronic Signature of Signing Officer or Director

Date