

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000016324

FILED
Mar 23, 2009
Secretary of State

Entity Name: DIRECT INSTALLATION SERVICES, INC.

Current Principal Place of Business:

1708 N. RONALD REAGAN BLVD.
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

1708 N. RONALD REAGAN BLVD.
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 20-0628265

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN, GARY MICHAEL
1708 N. RONALD REAGAN BLVD.
LONGWOOD, FL 32750 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: PRES () Delete
Name: MARTIN, GARY MICHAEL
Address: 225 PORCHESTER DR.
City-St-Zip: SANFORD, FL 32771

Title: VP () Delete
Name: AMBERSON, JOHN
Address: 5459 GLEN OAK PL.
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MARTIN, GARY MICHAEL
Address: 8546 CHRISTOPHERS HAVEN CT
City-St-Zip: SANFORD, FL 32771

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: JOHN AMBERSON

VP

03/23/2009

Electronic Signature of Signing Officer or Director

Date