

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000066073

Entity Name: EVENT SOLUTIONS, INC.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

924B SLIGHT BOULEVARD
ORLANDO, FL 32806 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 151234
ALTAMONTE SPRINGS, FL 32715 US

New Mailing Address:

FEI Number: 20-1063706

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENE, KELLY B
820 SWEETWATER ISLAND CIRCLE
LONGWOOD, FL 32779 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: P T () Delete
Name: GREENE, KELLY B
Address: 1738 NORTH SHORE TERRACE
City-St-Zip: ORLANDO, FL 32804 US

Title: VP S () Delete
Name: GREENE, FORREST A
Address: 928 LAKE MARION DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P T (X) Change () Addition
Name: GREENE, KELLY B
Address: 820 SWEETWATER ISLAND CIRCLE
City-St-Zip: LONGWOOD, FL 32779 US

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: KELLY GREENE

PRES

03/24/2009

Electronic Signature of Signing Officer or Director

Date