

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000079450

Entity Name: DSI CONSULTING, INC.

FILED
Mar 30, 2009
Secretary of State

Current Principal Place of Business:

3600 DALLAS HWY.
SUITE 230, #384
MARIETTA, GA 30064

Current Mailing Address:

3600 DALLAS HWY.
SUITE 230, #384
MARIETTA, GA 30064

New Principal Place of Business:

3050 FIVE FORKS TRICKUM ROAD
SUITE D-614
LILBURN, GA 30047

New Mailing Address:

3050 FIVE FORKS TRICKUM ROAD
SUITE D-614
LILBURN, GA 30047

FEI Number: 20-0875162

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWEN, RICHARD L
1 SEASHORE DRIVE
PENSACOLA, FL 32561 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 () Delete
Name: OWEN, RICHARD L
Address: 3600 DALLAS HWY., SUITE 230, #384
City-St-Zip: MARIETTA, GA 30064

Title: CEO () Delete
Name: COWEN, TIM
Address: 3600 DALLAS HWY., SUITE 230, #384
City-St-Zip: MARIETTA, GA 30064

Title: CFO () Delete
Name: JONES, SCOTT
Address: 3600 DALLAS HWY., SUITE 230, #384
City-St-Zip: MARIETTA, GA 30064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: OWEN, RICHARD L
Address: 3050 FIVE FORKS TRICKUM SUITE D-614
City-St-Zip: LILBURN, GA 30047

Title: CEO (X) Change () Addition
Name: COWEN, TIM
Address: 3050 FIVE FORKS TRICKUM SUITE D-614
City-St-Zip: LILBURN, GA 30047

Title: CFO (X) Change () Addition
Name: JONES, SCOTT R
Address: 3050 FIVE FORKS TRICKUM SUITE D-614
City-St-Zip: LILBURN, GA 30047

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: SCOTT R. JONES

CFO

03/30/2009

Electronic Signature of Signing Officer or Director

Date