

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000159564

Entity Name: IDS CONSULTING, INC.

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

1890 WOLFORD ROAD
SUITE 6
CLEARWATER, FL 33760 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4462
SEMINOLE, FL 33775 US

New Mailing Address:

P.O. BOX 16585
CLEARWATER, FL 33766 US

FEI Number: 20-1918048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMMONS, DEBORA L
1890 WOLFORD ROAD
SUITE 6
CLEARWATER, FL 33760 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: SIMMONS, DEBORA L
Address: PO BOX 4462
City-St-Zip: SEMINOLE, FL 33775 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SIMMONS, DEBORA L
Address: PO BOX 16585
City-St-Zip: CLEARWATER, FL 33766 US

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: DEBORA L SIMMONS

P

03/23/2009

Electronic Signature of Signing Officer or Director

_____ Date