

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000049021

FILED
Dec 11, 2008
Secretary of State**Entity Name:** WASHSYSTEMS, INC.**Current Principal Place of Business:**4533 SUNBEAM ROAD
#103
JACKSONVILLE, FL 32257**New Principal Place of Business:****Current Mailing Address:**4533 SUNBEAM ROAD
#103
JACKSONVILLE, FL 32257**New Mailing Address:****FEI Number:** 20-2619885**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HARVEY, TROY D
4533 SUNBEAM ROAD
#103
JACKSONVILLE, FL 32257 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**OFFICERS AND DIRECTORS:****Title:** D () Delete
Name: HARVEY, TROY D
Address: 4533 SUNBEAM ROAD #103
City-St-Zip: JACKSONVILLE, FL 32257**Title:** D (X) Delete
Name: HATCH, LESLIE A
Address: 4533 SUNBEAM ROAD #103
City-St-Zip: JACKSONVILLE, FL 32257**Title:** D (X) Delete
Name: SAKOVICH, ANGELE G
Address: 4533 SUNBEAM ROAD #103
City-St-Zip: JACKSONVILLE, FL 32257**Title:** D (X) Delete
Name: SEDDIG, GENA
Address: 4533 SUNBEAM ROAD #103
City-St-Zip: JACKSONVILLE, FL 32257**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PSD (X) Change () Addition
Name: HARVEY, TROY D
Address: 4533 SUNBEAM ROAD #103
City-St-Zip: JACKSONVILLE, FL 32257**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**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: TROY D. HARVEY

PSD

12/11/2008

Electronic Signature of Signing Officer or Director_____
Date