2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2007
Secretary of State

DOCUMENT# P05000101598

Entity Name: CELERA IT SERVICES, INC.

Current Principal Place of Business:

25 PINE CONE DR.
SUITE 2D
PALM COAST, FL 32164 US

New Principal Place of Business:

Current Mailing Address:

25 PINE CONE DR.
SUITE 2D
PALM COAST, FL 32164 US

New Mailing Address:

FEI Number: 38-3725491 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAFFERTY, SEAN
25 PINE CONE DR.
SUITE 2D
PALM COAST, FL 32164 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: LAFFERTY, SEAN
Address: 10 SLIPPERY ROCK PLACE
City-St-Zip: PALM COAST, FL 32164 US

Title: D ( ) Delete
Name: LAFFERTY, MICHAEL
Address: 47 LONDON DRIVE
City-St-Zip: PALM COAST, FL 32137 US

Title: D (X) Delete
Name: DATESMAN, ADAM
Address: 41 SATURN DRIVE
City-St-Zip: HAVRE DE GRACE, MD 21078 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: RIFE, DEREK C
Address: 14 WENDLIN LANE
City-St-Zip: PALM COAST, FL 32164 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SEAN LAFFERTY P 02/28/2007

Electronic Signature of Signing Officer or Director — Date