Jul-18-08 11:55am From-HEALD HOFFMEISTER 781-444 7/2

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 25, 2008 8:00 am
Secretary of State
07-25-2008 90010 039 ***158.75
08-25-2008 90002 031 ***391.25

DOCUMENT # P06000093594

1. Entity Name
OSWEGATCHIE CONSULTING INC.

Principal Place of Business	Mailing Address
6 COUNTRY ROAD WEST VILLAGE OF GOLF, FL 33436 US	6 COUNTRY ROAD WEST VILLAGE OF GOLF, FL 33436 US

0311200 1 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
51-0394437
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WEMYSS, CHARLES C SR
6 COUNTRY ROAD WEST
VILLAGE OF GOLF, FL 33436

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when designating

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fee

10. OFFICERS AND DIRECTORS

TITLE	P,D
NAME	WEMYSS, CHARLES C SR.
STREET ADDRESS	6 COUNTRY ROAD WEST
CITY-ST-ZIP	VILLAGE OF GOLF, FL 33436
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Charles C Wemyss 7/21/08 561-738-6139
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #