

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000153353

FILED
Sep 12, 2007
Secretary of State

Entity Name: INNOVATIVE CRAFTSMEN SOLUTIONS, INC.

Current Principal Place of Business:

1337 EDGEWATER COURT
LUTZ, FL 33559 US

New Principal Place of Business:

5214 CAREY RD.
TAMPA, FL 33624 US

Current Mailing Address:

1337 EDGEWATER COURT
LUTZ, FL 33559 US

New Mailing Address:

5214 CAREY RD.
TAMP, FL 33624 US

FEI Number: 20-8036450

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HESKETT, BRIAN R
1337 EDGEWATER COURT
LUTZ, FL 33559 US

Name and Address of New Registered Agent:

WILLIAMS, STEVEN N
5214 CAREY RD.
TAMPA, FL 33624 US

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: STEVEN N. WILLIAMS

09/12/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HESKETT, BRIAN R
Address: 1337 EDGEWATER COURT
City-St-Zip: LUTZ, FL 33559 US

Title: VPD (X) Delete
Name: WILLIAMS, STEVEN N
Address: 5214 CAREY ROAD
City-St-Zip: TAMPA, FL 33624 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WILLIAMS, STEVEN N
Address: 5214 CAREY
City-St-Zip: TAMPA, FL 33624 US

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: STEVEN N WILLIAMS

PD

09/12/2007

Electronic Signature of Signing Officer or Director

Date