

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000029378

FILED  
Apr 07, 2010  
Secretary of State

**Entity Name:** SYSTEM MAINTENANCE ON CONDITION, INC.

**Current Principal Place of Business:**

2509 SUCCESS DR  
STE 102  
ODESSA, FL 33556

**New Principal Place of Business:**

**Current Mailing Address:**

2509 SUCCESS DR  
STE 102  
ODESSA, FL 33556

**New Mailing Address:**

**FEI Number:** 20-8595307

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LYONS, GARY W  
311 S MISSOURI AVE  
CLEARWATER, FL 33756 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:** DPST  
**Name:** BORZILLERI, CHARLES V  
**Address:** 2509 SUCCESS DR STE 102  
**City-St-Zip:** ODESSA, FL 33556

**Title:** DP  
**Name:** GIANNONE, PIERO  
**Address:** 2509 SUCCESS DDR STE 102  
**City-St-Zip:** ODESSA, FL 33556

I hereby 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 all other like empowered.

**SIGNATURE:** CHARLES BORZILLERI

DPST

04/07/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date