

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000066711

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: INNOVATIVE TECH SOLUTIONS, INC.

## Current Principal Place of Business:

8140 NATURES WAY  
UNIT 11  
BRADENTON, FL 34202

## Current Mailing Address:

P.O. BOX 50574  
SARASOTA, FL 34232

## New Principal Place of Business:

9139 AVENUE POINTE CIRCLE  
UNIT 112  
ORLANDO, FL 32821

## New Mailing Address:

P.O. BOX 22506  
LAKE BUENA VISTA, FL 32830

FEI Number: 26-0314450

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LEITZ, JENNIFER A  
8140 NATURES WAY  
UNIT 11  
BRADENTON, FL 34202 US

## Name and Address of New Registered Agent:

LEITZ, JENNIFER A  
9139 AVENUE POINTE CIRCLE  
UNIT 112  
ORLANDO, FL 32821 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: JENNIFER LEITZ

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: LEITZ, JENNIFER A  
Address: 8140 NATURES WAY, UNIT 11  
City-St-Zip: BRADENTON, FL 34202

Title: PRES ( ) Delete  
Name: NORSKOV, CHRISTOPHER J  
Address: 2893 48TH WAY E  
City-St-Zip: BRADENTON, FL 34203

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: LEITZ, JENNIFER A  
Address: 9139 AVENUE POINTE CIRCLE, UNIT 112  
City-St-Zip: ORLANDO, FL 32821

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: JENNIFER LEITZ

CEO

04/21/2009

Electronic Signature of Signing Officer or Director

Date