

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000089529

**Entity Name:** TELESIS CONSULTING, INC.

**FILED**  
**Jan 18, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

7876 KIRKWOOD COVE  
OLIVE BRANCH, MS 38654 US

**New Principal Place of Business:**

**Current Mailing Address:**

7876 KIRKWOOD COVE  
OLIVE BRANCH, MS 38654 US

**New Mailing Address:**

**FEI Number:** 26-0757262

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPATIG, CHERYL L  
7876 KIRKWOOD COVE  
OLIVE BRANCH, FL 38654 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

**OFFICERS AND DIRECTORS:**

**Title:** PSTD  
**Name:** SPATIG, CHERYL L  
**Address:** 7876 KIRKWOOD COVE  
**City-St-Zip:** OLIVE BRANCH, MS 38654

**Title:** VP  
**Name:** SPATIG, GEORGE T SPATIG  
**Address:** 7876 KIRKWOOD COVE  
**City-St-Zip:** OLIVE BRANCH, MS 38654 US

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:** CHERYL L. SPATIG

PSTD

01/18/2011

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

\_\_\_\_\_  
Date