

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000104324

FILED  
Jun 27, 2009  
Secretary of State

Entity Name: COMPUTERS BY THE SEA INC.

## Current Principal Place of Business:

1001 N DIXIE FREEWAY  
NEW SMYRNA BEACH, FL 32168

## New Principal Place of Business:

## Current Mailing Address:

1001 N DIXIE FREEWAY  
NEW SMYRNA BEACH, FL 32168

## New Mailing Address:

FEI Number: 77-0699190

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SALYERDS, SHERYL  
381 WESTERN ROAD  
NEW SMYRNA, FL 32168 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

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: PVP ( ) Delete  
Name: SALYERDS, SHERYL  
Address: 381 WESTERN ROAD  
City-St-Zip: NEW SMYRNA, FL 32168

Title: T/S ( ) Delete  
Name: SALYERDS, SHERYL  
Address: 381 WESTERN ROAD  
City-St-Zip: NEW SMYRNA, FL 32168

Title: D ( ) Delete  
Name: SALYERDS, SHERYL  
Address: 381 WESTERN ROAD  
City-St-Zip: NEW SMYRNA, FL 32168

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SHERYL SALYERDS

OWNE

06/27/2009

Electronic Signature of Signing Officer or Director

Date