## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000001631

Entity Name: SMART HOME CONTROL SOLUTIONS, INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

150 WARREN CIRCLE 12276 SAN JOSE BLVD.

SUITE 4 SUITE 715

JACKSONVILLE, FL 32259 US JACKSONVILLE, FL 32223 US

Current Mailing Address: New Mailing Address:

150 WARREN CIRCLE 12276 SAN JOSE BLVD.

SUITE 4 SUITE 715

JACKSONVILLE, FL 32259 US JACKSONVILLE, FL 32223 US

FEI Number: 26-1701016 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

SMITH, TOD R ROSADO, NICHOLAS 150 WARREN CIRCLE ROSADO, NICHOLAS 12276 SAN JOSE BLVD.

JACKSONVILLE, FL 32259 US SUITE 715

JACKSONVILLE, FL 32223 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: NICHOLAS ROSADO 04/28/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR ( ) Delete Title: CEO (X) Change ( ) Addition

 Name:
 SMITH, TOD R
 Name:
 ROSADO, NICHOLAS

 Address:
 1748 SOUTHCREEK DR
 Address:
 163 ELMWOOD DR.

 City-St-Zip:
 JACKSONVILLE, FL 32259 US
 City-St-Zip:
 ST. JOHNS, FL 32259 US

Title: DIR () Delete Title: DIR (X) Change () Addition

 Name:
 SMITH, PATRICIA A
 Name:
 KOHL, ADAM J

 Address:
 1748 SOUTHCREEK DR
 Address:
 150 WARREN CIRCLE

 City-St-Zip:
 JACKSONVILLE, FL 32259 US
 City-St-Zip:
 ST. JOHNS, FL 32259 US

Title: DIR () Delete Title: DIR (X) Change () Addition
Name: ROSADO, NICHOLAS Name: SCHIATTARELLA, ANGELO
Address: 163 FLMWOOD DRIVE Address: 413 SPRING RIDGE CT

 Address:
 163 ELMWOOD DRIVE
 Address:
 413 SPRING RIDGE CT.

 City-St-Zip:
 JACKSONVILLE, FL 32259
 City-St-Zip:
 ST. AUGUSTINE, FL 32092

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: NICHOLAS ROSADO CEO 04/28/2009