

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000002018

FILED  
Jan 16, 2009  
Secretary of State

Entity Name: BREAKAWAY TRAINING SOLUTIONS, INC.

## Current Principal Place of Business:

1449 MONTE LAKE DRIVE  
VALRICO, FL 335967160

## New Principal Place of Business:

202 WILD OAK DRIVE  
BRANDON, FL 33511

## Current Mailing Address:

1449 MONTE LAKE DRIVE  
VALRICO, FL 335967160

## New Mailing Address:

PO BOX 6566  
BRANDON, FL 33508

FEI Number: 26-1750364

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NELSON, KEVIN W  
1449 MONTE LAKE DRIVE  
VALRICO, FL 335967160 US

## Name and Address of New Registered Agent:

NELSON, KEVIN W  
202 WILD OAK DRIVE  
BRANDON, FL 33511 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:

01/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: NELSON, KEVIN W  
Address: 1449 MONTE LAKE DRIVE  
City-St-Zip: VALRICO, FL 335967160

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: NELSON, KEVIN W  
Address: 202 WILD OAK DRIVE  
City-St-Zip: BRANDON, FL 33511 US

Title: VP ( ) Change (X) Addition  
Name: NELSON, JANET M  
Address: 202 WILD OAK DRIVE  
City-St-Zip: BRANDON, FL 33511 US

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: KEVIN W. NELSON

DPST

01/16/2009

Electronic Signature of Signing Officer or Director

Date