

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000024783

FILED
Apr 07, 2009
Secretary of State

Entity Name: ITCS CONSULTING SERVICES INC.

Current Principal Place of Business:

2527 S W 37TH TERRACE
CAPE CORAL, FL 33914

New Principal Place of Business:

4913 SW 26TH PLACE
CAPE CORAL, FL 33914

Current Mailing Address:

2527 S W 37TH TERRACE
CAPE CORAL, FL 33914

New Mailing Address:

4913 SW 26TH PLACE
CAPE CORAL, FL 33914

FEI Number: 26-2172294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DUBE, LESLIE M
2527 S W 37TH TERRACE
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

DUBE, LESLIE M
4913 SW 26TH PLACE
CAPE CORAL, FL 33914 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: _____

04/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DUBE, LESLIE M
Address: 2527 S W 37TH TERRACE
City-St-Zip: CAPE CORAL, FL 33914

Title: D () Delete
Name: DUBE, LESLIE M
Address: 2527 S W 37TH TERRACE
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DUBE, LESLIE M
Address: 4913 SW 26TH PLACE
City-St-Zip: CAPE CORAL, FL 33914

Title: D (X) Change () Addition
Name: DUBE, LESLIE M
Address: 4913 SW 26TH PLACE
City-St-Zip: CAPE CORAL, FL 33914

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: LESLIE M DUBE

P

04/07/2009

Electronic Signature of Signing Officer or Director

Date