## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000027106

City-St-Zip: PALM COAST, FL 32164

Entity Name: TWISTERS SOFTSERVE, INC

FILED Apr 17, 2009 Secretary of State

Entity Nai	me: IVVISTER	RS SOFTSERVE, INC.			
Current P	rincipal Place	of Business:	New Principal Place of	New Principal Place of Business:	
	DDDY BLVD # <sup>*</sup> , FL 32110	101			
Current M	lailing Addres	ss:	New Mailing Address:	New Mailing Address:	
55 WEDGEWOOD LANE PALM COAST, FL 32165			4750 E MODDY BLVD # BUNNELL, FL 32110	4750 E MODDY BLVD #101 BUNNELL, FL 32110	
FEI Number	: 42-1757935	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
	NJAMIN ONE DRIVE S AST, FL 3216				
	e named entity : e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electror	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( GREENHAM, V 55 WEDGEWO PALM COAST,	OOD LANE	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address:	V ( ) GREENHAM, P 55 WEDGEWO		Title: V () Name: GREENWOOI Address: 55 WEDGEW	•	

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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: WILLIAM GREENHAM P 04/17/2009