

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000037240

Entity Name: M.S.O.I., INC.

FILED
Jun 03, 2009
Secretary of State

Current Principal Place of Business:

20046 CAUSEWAY BLVD
LAND O LAKES, FL 34638 US

New Principal Place of Business:

Current Mailing Address:

20046 CAUSEWAY BLVD
LAND O LAKES, FL 34638 US

New Mailing Address:

FEI Number: 26-2394728

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAWRYCH, PATRICK
20046 CAUSEWAY BLVD.
LAND O LAKES, FL 34638 US

Name and Address of New Registered Agent:

GAWRYCH, PATRICK B PVST
20046 CAUSEWAY BLVD.
LAND O LAKES, FL 34638 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: PATRICK GAWRYCH

06/03/2009

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: PVST () Delete
Name: GAWRYCH, PATRICK
Address: 20046 CAUSEWAY BLVD
City-St-Zip: LAND O LAKES, FL 34638 US

Title: D () Delete
Name: GAWRYCH, PATRICK
Address: 20046 CAUSEWAY BLVD
City-St-Zip: LAND O LAKES, FL 34638 US

Title: D () Delete
Name: GAWRYCH, STACEY
Address: 20046 CAUSEWAY BLVD
City-St-Zip: LAND O LAKES, FL 34638 US

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: PATRICK GAWRYCH

PVST

06/03/2009

Electronic Signature of Signing Officer or Director

Date