

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000000425

Entity Name: PREFERRED SOLUTIONS, INC.

FILED
Jan 21, 2009
Secretary of State

Current Principal Place of Business:

9301 GULF SHORE DRIVE
NAPLES, FL 34108 US

New Principal Place of Business:

6700 WHITE BLOSSOM CIRCLE
JACKSONVILLE, FL 32258 US

Current Mailing Address:

9301 GULF SHORE DR
NAPLES, FL 34108 US

New Mailing Address:

6700 WHITE BLOSSOM CIRCLE
JACKSONVILLE, FL 32258 US

FEI Number: 65-0377344

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAUL, CHARLOTTE M
16253 COCO HAMMOCK WAY
102
FORT MYERS, FL 33908 US

Name and Address of New Registered Agent:

PAUL, CHARLOTTE M
6700 WHITE BLOSSOM CIRCLE
JACKSONVILLE, FL 32258 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:

01/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PAUL, DEANA C
Address: 16251 DBULIN CIRCLE #F204
City-St-Zip: FORT MYERS, FL 33908

Title: S/T () Delete
Name: PAUL, CHARLOTTE M
Address: 16253 COCO HAMMOCK WAY #102
City-St-Zip: FORT MYERS, FL 33908

Title: VP () Delete
Name: PAUL, BRIAN C
Address: 2608 OAK GROVE AVE
City-St-Zip: ST. AUGUSTINE, FL 32092

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PAUL, DEANA C
Address: 6700 WHITE BLOSSOM CIRCLE
City-St-Zip: JACKSONVILLE, FL 32258

Title: S/T (X) Change () Addition
Name: PAUL, CHARLOTTE M
Address: 6700 WHITE BLOSSOM CIRCLE
City-St-Zip: JACKSONVILLE, FL 32258

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: CHARLOTTE M PAUL

S/T

01/21/2009

Electronic Signature of Signing Officer or Director

Date