

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000020449

FILED
Jan 15, 2009
Secretary of State

Entity Name: EXECUSYS, INC.

Current Principal Place of Business:

6767 N. WIDCHAM RD
SUITE 508
MELBOURNE, FL 32940 US

New Principal Place of Business:

6767 N. WICKHAM RD
SUITE 508
MELBOURNE, FL 32940 US

Current Mailing Address:

6767 N. WIDCHAM RD
SUITE 508
MELBOURNE, FL 32940 US

New Mailing Address:

6767 N. WICKHAM RD
SUITE 508
MELBOURNE, FL 32940 US

FEI Number: 59-3173232

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, JAMES A
1230 PALM GARDEN PL
MELBOURNE, FL 32940 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THOMAS, JAMES A
Address: 1230 PALM GARDEN PL
City-St-Zip: MELBOURNE, FL 32940

Title: V () Delete
Name: HARALSON, EDDIE C
Address: PO BOX 560752
City-St-Zip: ROCKLEDGE, FL 32956

Title: T () Delete
Name: VANDERWRKEN, DANIEL
Address: 2355 BAY HILL DR.
City-St-Zip: VIERA, FL 32940

Title: S () Delete
Name: SANDERS, JEFFREY
Address: 5124 LIMOUSIN CT
City-St-Zip: ROCKLEDGE, FL 32955

Title: D () Delete
Name: THOMAS, DR, JAMES J
Address: 102 WOODLAND DRIVE
City-St-Zip: MORGANTON, NC 28655

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:

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: JAMES A THOMAS

P

01/15/2009

Electronic Signature of Signing Officer or Director

Date