

# 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P94000017211

Entity Name: SYSTEM INNOVATORS, INC.

FILED  
Apr 07, 2008  
Secretary of State

## Current Principal Place of Business:

10550 DEERWOOD PARK BLVD., STE. 700  
JACKSONVILLE, FL 32256 US

## Current Mailing Address:

10550 DEERWOOD PARK BLVD., STE. 700  
JACKSONVILLE, FL 32256 US

## New Principal Place of Business:

1031 1ST STREET SOUTH  
906  
JACKSONVILLE BEACH, FL 32250 US

## New Mailing Address:

1031 1ST STREET SOUTH  
906  
JACKSONVILLE BEACH, FL 32250 US

FEI Number: 59-3227491

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FISHER, TOUSEY, LEAS & BALL, P.A.  
818 N. A1A  
SUITE 104  
PONTE VEDRA BEACH, FL 32082 US

## Name and Address of New Registered Agent:

FISHER, TOUSEY, LEAS & BALL, P.A.  
818 NORTH A1A  
SUITE 104  
PONTE VEDRA BEACH, FL 32082 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:

04/07/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: TS ( ) Delete  
Name: NELSON, ROGER D  
Address: 10550 DEERWOOD PARK BLVD, STE 700  
City-St-Zip: JACKSONVILLE, FL 32256

Title: CFO (X) Delete  
Name: SMART, MARK C  
Address: 10550 DEERWOOD PARK BLVD, STE 700  
City-St-Zip: JACKSONVILLE, FL 32256

Title: PRES (X) Delete  
Name: LANGFORD, KELLEY J  
Address: 10550 DEERWOOD PARK BLVD STE 700  
City-St-Zip: JACKSONVILLE, FL 32256

Title: CEO (X) Delete  
Name: SIMAK, JAMES A  
Address: 10550 DEERWOOD PARK BLVD STE 700  
City-St-Zip: JACKSONVILLE, FL 32256

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change ( ) Addition  
Name: NELSON, ROGER D  
Address: 1031 1ST STREET SOUTH  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: ROGER D. NELSON

PTS

04/07/2008

Electronic Signature of Signing Officer or Director

Date