2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000048388

Entity Name: CANDO CONSULTANT SERVICE, INC.

FILED Mar 04, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

1384-54TH AVE NE 1384-54TH AVE NE

SAINT PETERSBURG, FL 33703 SAINT PETERSBURG, FL 33703 US

Current Mailing Address: New Mailing Address:

POB 55368 POB 55368

SAINT PETERSBURG, FL 33732 SAINT PETERSBURG, FL 33732 US

FEI Number: 59-3253673 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:

WINEBRENNER, J M 1384-54TH AVE NE

SAINT PETERSBURG, FL 33703 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:

Date

Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition Name: EAVES, LELAND Name: EAVES, LELAND 4250 E 125TH AVE 4250 E 125TH AVE Address: Address:

City-St-Zip: DENVER, CO 80241 City-St-Zip: DENVER, CO 80241 US

Title: Title: () Delete (X) Change () Addition

Name: EAVES, JENNIFER Name: EAVES, JENNIFER

2401-30 1/2 AVE SOUTH #202 2401-30 1/2 AVE SOUTH #202 Address: Address: FARGO, ND 58103 FARGO, ND 58103 US City-St-Zip: City-St-Zip:

Title: Title: VΡ (X) Change () Addition VΡ () Delete

COSE, KARMA Name: COSE, KARMA Name:

2401-30 1/2 AVE. S. #303 2401-30 1/2 AVE. S. #303 Address: Address: City-St-Zip: FARGO, ND 58103 City-St-Zip: FARGO, ND 58103 US

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: JACK WINEBRENNER RA 03/04/2009