

2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P97000025150

FILED
Jul 06, 2010
Secretary of State

Entity Name: AGENCY SOLUTIONS INTERNATIONAL, INC.

Current Principal Place of Business:

4890 W. KENNEDY BLVD.
SUITE 500
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

4890 W. KENNEDY BLVD.
SUITE 500
TAMPA, FL 33609

New Mailing Address:

FEI Number: 59-3439650

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMOLINSKI, ROBERT A
4890 W. KENNEDY BLVD.
SUITE 500
TAMPA, FL 33609 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

OFFICERS AND DIRECTORS:

Title: C
Name: DAVIS, CHARLES M JR
Address: 4890 W. KENNEDY BLVD., SUITE 500
City-St-Zip: TAMPA, FL 33609

Title: D
Name: MURRAY, JAMES K III
Address: 4890 W. KENNEDY BLVD., SUITE 500
City-St-Zip: TAMPA, FL 33609

Title: PRES
Name: SHEPPARD, DIANNA
Address: 4890 W. KENNEDY BLVD., SUITE 500
City-St-Zip: TAMPA, FL 33609

Title: D
Name: NELSON, KENT
Address: 4890 W. KENNEDY BLVD., SUITE 500
City-St-Zip: TAMPA, FL 33609

Title: D
Name: KONTAGOURIS, VENETIA
Address: 4890 W. KENNEDY BLVD., SUITE 500
City-St-Zip: TAMPA, FL 33609

Title: T
Name: SMOLINSKI, ROBERT A
Address: 4890 W. KENNEDY BLVD., STE. 500
City-St-Zip: TAMPA, FL 33609

I hereby 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 all other like empowered.

SIGNATURE: ROBERT A. SMOLINSKI

T

07/06/2010

Electronic Signature of Signing Officer or Director

Date