2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000038222

Entity Name: OFFICE INNOVATIONS, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
4676-1 DUSK COURT JACKSONVILLE, FL 32207	

Current Mailing Address:	**New Mailing Address:**
4676-1 DUSK COURT JACKSONVILLE, FL 32207	

FEI Number: 59-3450745   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:**
LECALSEY, CHERYL M 1225 REDCLIFFE LANE SAINT AUGUSTINE, FL 32095 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: _____

          Electronic Signature of Registered Agent   Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	O ( ) Delete	Title:	( ) Change ( ) Addition
Name:	LECALSEY, CHRISTOPHER R	Name:	
Address:	1225 REDCLIFFE LN	Address:	
City-St-Zip:	SAINT AUGUSTINE, FL 32095	City-St-Zip:	
Title:	O ( ) Delete	Title:	( ) Change ( ) Addition
Name:	LECALSEY, CHERYL M	Name:	
Address:	1225 REDCLIFFE LN	Address:	
City-St-Zip:	SAINT AUGUSTINE, FL 32095	City-St-Zip:	
Title:	O ( ) Delete	Title:	( ) Change ( ) Addition
Name:	BUSBEE, GRANT M	Name:	
Address:	10643 LAKEVIEW ROAD EAST	Address:	
City-St-Zip:	JACKSONVILLE, FL 32225	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: CHERYL M LECALSEY   O   03/04/2009

        Electronic Signature of Signing Officer or Director   Date