

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S05079

FILED
Mar 20, 2007
Secretary of State

Entity Name: CONSOLIDATED INFORMATION SYSTEMS, INC.

Current Principal Place of Business:

1770 O'BERRY COURT
KISSIMMEE, FL 34746 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1200
CORTARO, AZ 856521200

New Mailing Address:

FEI Number: 59-3032916

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATE, THOMAS E.
1770 O'BERRY CT
KISSIMMEE, FL 34746 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: PATE, THOMAS E.,
Address: P.O. BOX 1200
City-St-Zip: CORTARO, AZ 856521200

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: PATE, LAUREL L.,
Address: P.O. BOX 1200
City-St-Zip: CORTARO, AZ 856521200

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS E PATE

P

03/20/2007

Electronic Signature of Signing Officer or Director

Date