2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S65575

FILED Feb 05, 2007 Secretary of State

Entity Name: SPACE COAST COMPUTER SOLUTIONS, INC.

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

P.O. BOX 542761 1825 MILI AVENUE

MERRITT ISLAND, FL 329542761 MERRITT ISLAND, FL 32952

Current Mailing Address: New Mailing Address:

P.O. BOX 542761

MERRITT ISLAND, FL 329542761

FEI Number: 59-3091230 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:

MARKEY, KEVIN P 15 EAST MERRITT ISLAND CSWY MERRITT ISLAND, FL 32952

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

HUFF, JAMES R., HUFF, JAMES R., Name: Name: 1820 CRAWFORD AVE. Address: Address:

5711 CINNAMON FERN DRIVE City-St-Zip: MERRITT ISLAND, FL City-St-Zip: COCOA, FL 32927

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

VIVIAN, JOHN G., VIVIAN, JOHN G., Name: Name: 1825 MILI AVE 1825 MILI AVE Address: Address: MERRITT ISLAND, FL MERRITT ISLAND, FL 32952

City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: () Delete DV DILLMAN, JAMES A., Name: DILLMAN, JAMES A., Name:

2155 WINDSOR ST 4063 N. INDIAN RIVER DRIVE Address: Address:

City-St-Zip: MERRITT ISLAND, FL City-St-Zip: COCOA, FL 32927

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: JOHN G. VIVIAN **DPT** 02/05/2007