

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S65575

**FILED**  
**Jan 13, 2012**  
**Secretary of State**

**Entity Name:** SPACE COAST COMPUTER SOLUTIONS, INC.

**Current Principal Place of Business:**

5711 CINNAMON FERN BLVD  
COCOA, FL 32927

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 505  
SHARPES, FL 32959

**New Mailing Address:**

**FEI Number:** 59-3091230

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HUFF, JAMES R  
5711 CINNAMON FERN BLVD  
COCOA, FL 32927 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: DPT  
Name: HUFF, JAMES R.  
Address: 5711 CINNAMON FERN BLVD  
City-St-Zip: COCOA, FL 32927

Title: DVS  
Name: DILLMAN, JAMES A.  
Address: 4063 N. INDIAN RIVER DRIVE  
City-St-Zip: COCOA, FL 32927

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: JAMES R HUFF

DPT

01/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date