2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2009
Secretary of State

DOCUMENT# S84312

Entity Name: 9 TO 5 COMPUTER SUPPLY DISTRIBUTORS, INC.

Current Principal Place of Business:

1548 THE GREENS WAY
SUITE 2
JACKSONVILLE BEACH, FL 32250 US

New Principal Place of Business:

Current Mailing Address:

1548 THE GREENS WAY
SUITE 2
JACKSONVILLE BEACH, FL 32250 US

New Mailing Address:

FEI Number: 65-0292659 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAAB, KEVIN C SEC
1548 THE GREENS WAY
SUITE 2
JACKSONVILLE BEACH, FL 32250 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: TRES ( ) Delete
Name: RAAB, RICHARD C,
Address: 244 N WIND CT
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: SEC ( ) Delete
Name: RAAB, BRENDA L.,
Address: 244 N WIND CT
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: CFO ( ) Delete
Name: RAAB, CHRISTOPHER,
Address: 1137 MARSH VIEW WAY
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: CEO ( ) Delete
Name: RAAB, KEVIN,
Address: 4509 SWILCAN BRIDGE LANE N.
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TRES (X) Change ( ) Addition
Name: RAAB, RICHARD C,
Address: 2391 OCEAN BREEZE CT.
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: SEC (X) Change ( ) Addition
Name: RAAB, BRENDA L.,
Address: 2391 OCEAN BREEZE CT.
City-St-Zip: ATLANTIC BEACH, FL 32233

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: CHRIS RAAB CFO 03/13/2009

Electronic Signature of Signing Officer or Director Date