

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V50160

Entity Name: INFINITE SOLUTIONS, INC.

FILED
Apr 09, 2009
Secretary of State

Current Principal Place of Business:

2004 LENNOX RD E
PALM HARBOR, FL 34683 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 452
PALM HARBOR, FL 34682 US

New Mailing Address:

FEI Number: 59-3144658 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VRECENAK, THOMAS R., P.A.
35951 US HWY. 19 NORTH
PALM HARBOR, FL 34684 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: PD () Delete
Name: WITKOWSKI, EDWARD
Address: 2004 LENNOX RD E
City-St-Zip: PALM HARBOR, FL 34683

Title: VD () Delete
Name: VAN DE KAMP, THEODORE J
Address: 6 NEW ST STE 4H
City-St-Zip: E NORWALK, CT

Title: ST () Delete
Name: WITKOWSKI, ROSALIE K
Address: 2004 LENNOX RD E
City-St-Zip: PLAM HARBOR, FL 34683

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WITKOWSKI, EDWARD
Address: 2004 LENNOX RD E
City-St-Zip: PALM HARBOR, FL 34683 US

Title: VD (X) Change () Addition
Name: VAN DE KAMP, THEODORE J
Address: 100 SEAVIEW AVE
City-St-Zip: E NORWALK, CT 06855 US

Title: ST (X) Change () Addition
Name: WITKOWSKI, ROSALIE K
Address: 2004 LENNOX RD E
City-St-Zip: PLAM HARBOR, FL 34683 US

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: EDWARD WITKOWSKI

PD

04/09/2009

Electronic Signature of Signing Officer or Director

Date