

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V59818

FILED
Apr 29, 2009
Secretary of State

Entity Name: VEARD COMPUTER RESEARCH, INC.

Current Principal Place of Business:

213 HARBOUR DR W
INDIAN HABOUR BEACH, FL 32937

New Principal Place of Business:

2240 LAKES OF MELBOURNE DR
MELBOURNE, FL 32904

Current Mailing Address:

PO BOX 121414
WEST MELBOURNE, FL 32912

New Mailing Address:

FEI Number: 74-2506117 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VE ARD, CHERIE L
213 HARBOUR DR W
INDIAN HARBOUR BEACH, FL 32937 US

Name and Address of New Registered Agent:

VEARD, LYNDAL
2240 LAKES OF MELBOURNE DR
MELBOURNE, FL 32904 US

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: LYNDAL VEARD

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: VEARD, TIMOTHY A.
Address: 2240 LAKES OF MELBOURNE DR
City-St-Zip: INDIALANTIC, FL 32903

Title: DTS () Delete
Name: VEARD, LYNDAL R.
Address: 2240 LAKES OF MELBOURNE DR
City-St-Zip: MELBOURNE, FL 32904

Title: P () Delete
Name: VE ARD, CHERIE L
Address: 213 HARBOUR DR W
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: P (X) Change () Addition
Name: VE ARD, CHERIE L
Address: 110 E CENTER #614
City-St-Zip: MADISON, SD 57042

Title: D () Change (X) Addition
Name: GIL, SHADDOCK
Address: 125 ELM ST
City-St-Zip: SATELLITE BEACH, FL 32937

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: LYNDAL VEARD

DTS

04/29/2009

Electronic Signature of Signing Officer or Director

Date