2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2009
Secretary of State

DOCUMENT# 532875

Entity Name: MR. COPY SERVICE, INC.

Current Principal Place of Business:

4200 VICTOR ST/P O BOX 5181
JACKSONVILLE, FL 322475181 US

New Principal Place of Business:

4200 VICTOR ST.
JACKSONVILLE, FL 322475181 US

Current Mailing Address:

4200 VICTOR ST/P O BOX 5181
JACKSONVILLE, FL 322475181 US

New Mailing Address:

FEI Number: 59-1736917 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PRYCE, EARL
4200 VICTOR ST
JACKSONVILLE, FL 32207 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: VP ( ) Delete
Name: PRYCE, EARL
Address: 1857 ST. JOHNS BLUFF RD
City-St-Zip: JACKSONVILLE, FL

Title: S ( ) Delete
Name: PRYCE, CAROLE
Address: 1857 ST. JOHNS BLF RD N
City-St-Zip: JACKSONVILLE, FL

Title: P ( ) Delete
Name: PRYCE, EARL
Address: 4200 VICTOR ST
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: PRYCE, CAROLE
Address: 1857 ST. JOHNS BLUFF RD
City-St-Zip: JACKSONVILLE, FL 32225

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: EARL PRYCE P 02/24/2009

Electronic Signature of Signing Officer or Director — Date