

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 14, 2010
Secretary of State**

DOCUMENT# N01000000065

Entity Name: SPECIAL AGENT OFF DUTY BILLING ASSOCIATION, INC.

Current Principal Place of Business:

4406 HUDSON LANE
TAMPA, FL 33618

New Principal Place of Business:

Current Mailing Address:

4406 HUDSON LANE
TAMPA, FL 33618

New Mailing Address:

FEI Number: 59-3688871 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MONES, ALAN M
4211 N LOIS AVE
TAMPA, FL 33614 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: DPST
Name: MONES, ALAN M
Address: 4211 N LOIS AVE
City-St-Zip: TAMPA, FL 33614

Title: DV
Name: WILSON, MARCUS K
Address: 4211 N. LOIS AVE.
City-St-Zip: TAMPA, FL 33614

Title: DV
Name: WILCOX, ELLEN S
Address: 4211 LOIS AVE.
City-St-Zip: TAMPA, FL 33614

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALAN M. MONES

PD

03/14/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date