

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000076968

Entity Name: BROOKSVILLE SERVICES INC.

FILED
Mar 24, 2008
Secretary of State

Current Principal Place of Business:

15473 PEACH ORCHARD ROAD
BROOKSVILLE, FL 34614

New Principal Place of Business:

Current Mailing Address:

20 SOUTH BROAD STREET
BROOKSVILLE, FL 34601

New Mailing Address:

PO BOX 10491
BROOKSVILLE, FL 34603

FEI Number: 20-2904350

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE HOGAN LAW FIRM, LLC
20 SOUTH BROAD STREET
BROOKSVILLE, FL 34601 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: WELLS, HADDEN IV
Address: P.O. BOX 10491
City-St-Zip: BROOKSVILLE, FL 34603

Title: STD () Delete
Name: WELLS, MELISSA
Address: P.O. BOX 10491
City-St-Zip: BROOKSVILLE, FL 34603

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: HADDEN WELLS IV

PD

03/24/2008

Electronic Signature of Signing Officer or Director

Date