

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000089156

Entity Name: CLERICAL SOLUTIONS, INC.

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

345 BAYSHORE BLVD. #903
TAMPA, FL 33606

New Principal Place of Business:

1122 S. FLETCHER AVE.
FERNANDINA BEACH, FL 32034

Current Mailing Address:

P.O. BOX 4295
TAMPA, FL 33677

New Mailing Address:

1122 S. FLETCHER AVE.
FERNANDINA BEACH, FL 32034

FEI Number: 20-3037002

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUCOTE, JEAN
345 BAYSHORE BLVD. #903
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

DUCOTE, JEAN
1122 S. FLETCHER AVE.
FERNANDINA BEACH, FL 32034 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:

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DUCOTE, JEAN
Address: 345 BAYSHORE BLVD #903
City-St-Zip: TAMPA, FL 33606

Title: V () Delete
Name: DUCOTE, JOSEPH
Address: 345 BAYSHORE BLVD. #903
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DUCOTE, JEAN
Address: 1122 S. FLETCHER AVE.
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: V (X) Change () Addition
Name: DUCOTE, JOSEPH
Address: 1122 S. FLETCHER AVE.
City-St-Zip: FERNANDINA BEACH, FL 32034

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: JEAN DUCOTE

P

05/01/2008

Electronic Signature of Signing Officer or Director

Date