

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000053014

FILED
Apr 23, 2009
Secretary of State

Entity Name: ACCIDENT/TRAUMA SCENE CLEANERS -TAMPA, INC.

Current Principal Place of Business:

304 E. NORTH ST
TAMPA, FL 33604

New Principal Place of Business:

Current Mailing Address:

PO BOX 530395
ST PETERSBURG, FL 33747

New Mailing Address:

PO BOX 7395
TAMPA, FL 33673

FEI Number: 26-2708167

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURDEN, BRIAN A
3601 W. MULLEN AVE
TAMPA, FL 33609 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 (X) Delete
Name: ACCIDENT TRAUMA SCENE CLEANERS, INC.
Address: PO BOX 530395
City-St-Zip: ST PETERSBURG, FL 33747 US

Title: P () Delete
Name: HENSON, MARK W
Address: 1602 HARVARD WOODS DR, APT 2315
City-St-Zip: BRANDON, FL 33511 US

Title: P () Delete
Name: POLSON, GEOFF D
Address: 304 E. NORTH ST
City-St-Zip: TAMPA, FL 33604 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MARK W HENSON

P

04/23/2009

Electronic Signature of Signing Officer or Director

_____ Date