

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000075521

Entity Name: ABSOLUTE VALUE, INC.

FILED
May 05, 2008
Secretary of State

Current Principal Place of Business:

722 BAYSHORE DR
TERRA CEIA, FL 34250

New Principal Place of Business:

610 RIVIERA DUNES WAY #505
PALMETTO, FL 34221

Current Mailing Address:

P O BOX 162
TERRA CEIA, FL 34250

New Mailing Address:

610 RIVIERA DUNES WAY #505
PALMETTO, FL 34221

FEI Number: 65-0861242

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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

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: PD () Delete
Name: PAINTER, DONALD H
Address: 722 BAYSHORE DR., P O BOX 162
City-St-Zip: TERRA CEIA, FL 34250

Title: STD () Delete
Name: PAINTER, DIANA M
Address: 722 BAYSHORE DR., P O BOX 162
City-St-Zip: TERRA CEIA, FL 34250

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PAINTER, DONALD H
Address: 610 RIVIERA DUNES WAY #505
City-St-Zip: PALMETTO, FL 34221

Title: STD (X) Change () Addition
Name: PAINTER, DIANA M
Address: 610 RIVIERA DUNES WAY #505
City-St-Zip: PALMETTO, FL 34221

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: DONALD H PAINTER

PD

05/05/2008

Electronic Signature of Signing Officer or Director

Date