

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000026108

**Entity Name:** ALL SERVICES SOUTHEAST, INC.

**Current Principal Place of Business:**

4503 IRVINGTON AVE.

#9

JACKSONVILLE, FL 32210

**Current Mailing Address:**

P.O. BOX 10042

FLEMING ISLAND, FL 32006

**FEI Number: 33-1070460**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WAGONER, CHARLES M

4925 HARVEY GRANT ROAD

FLEMING ISLAND, FL 32203 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:** CHARLES M. WAGONER

04/28/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DP

Title DTS

Name FORT, DEAN A

Name WAGONER, CHARLES M

Address 4161 ROBIN HOOD ROAD

Address P.O. BOX 10042

City-State-Zip: JACKSONVILLE FL 32210

City-State-Zip: FLEMING ISLAND FL 32006

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

**SIGNATURE:** CHARLES M. WAGONER

**SECRETARY**

04/28/2016

Electronic Signature of Signing Officer/Director Detail

Date