

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 141498

Entity Name: REBUILDING SERVICE, INC.

FILED
Jan 26, 2009
Secretary of State

Current Principal Place of Business:

2022 HENDRICKS AVE
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

Current Mailing Address:

2022 HENDRICKS AVENUE
JACKSONVILLE, FL 32207 US

New Mailing Address:

FEI Number: 59-0417151 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BLACKBURN & COMPANY, L.C.
5150 BELFORT RD S BLDG 500
JACKSONVILLE, FL 32256 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: DP () Delete
Name: MASON, RAYMOND K
Address: 2022 HENDRICKS AVENUE
City-St-Zip: JACKSONVILLE, FL

Title: SV () Delete
Name: SALEN, SHERRIE
Address: 2022 HENDRICKS AVENUE
City-St-Zip: JACKSONVILLE, FL

Title: VT () Delete
Name: MOODY, MARCY M
Address: 2022 HENDRICKS AVENUE
City-St-Zip: JACKSONVILLE, FL

Title: S () Delete
Name: PRITCHETT, ANNETTE
Address: 2022 HENDRICKS AVENUE
City-St-Zip: JACKSONVILLE, FL

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:

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: SHERRIE SALEN

SV

01/26/2009

Electronic Signature of Signing Officer or Director

Date