


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 17, 2008 08:00 AM
Secretary of State

DOCUMENT # 201693 1. Entity Name ORLANDO BUILDING SERVICE INC	
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Principal Place of Business 15717 OAKLAND AVE OAKLAND, FL 34760 US	Mailing Address POB 488 OAKLAND, FL 34760 US
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DO NOT WRITE IN THIS SPACE



01092008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-0822411	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MITCHELL, R.JAMES 15717 OAKLAND AVE OAKLAND, FL 34760

8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MITCHELL, R JAMES 15717 OAKLAND A E OAKLAND, FL 34760
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MITCHELL, CAROLYN 15717 OAKLAND AVE OAKLAND, FL 34760
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MITCHELL, STEPHEN 15717 OAKLAND AVE OAKLAND, FL 34760
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>000000786834 01/17/08-80059-009 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.
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SIGNATURE: R JAMES MITCHELL <i>R James Mitchell</i> 1/14/08 407 326 5203 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>
