

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 246886

FILED
Jan 06, 2009
Secretary of State

Entity Name: BUSHNELL SERVICE CORPORATION

Current Principal Place of Business:

3832-10 BAYMEADOWS ROAD, STE 351
JACKSONVILLE, FL 32217 US

New Principal Place of Business:

Current Mailing Address:

3832-10 BAYMEADOWS ROAD, STE 351
JACKSONVILLE, FL 32217 US

New Mailing Address:

FEI Number: 59-0947845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINN, CHARLOTTE
6034 CHESTER AVE.
SUITE #209
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

LINN, CHARLOTTE
3832 -10 BAYMEADOWS ROAD
351
JACKSONVILLE, FL 32217 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:

01/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LINN, CHARLOTTE
Address: 6034 CHESTER AVE SUITE 209
City-St-Zip: JACKSONVILLE, FL 32217

Title: DVT () Delete
Name: RANTZ, JACOB F.
Address: 6034 CHESTER AVE SUITE 209
City-St-Zip: JACKSONVILLE, FL 32217

Title: DVS () Delete
Name: LINN, JAMES A.,
Address: 6034 CHESTER AVE SUITE 209
City-St-Zip: JACKSONVILLE, FL 32217

Title: DVP () Delete
Name: RANTZ, BARBARA
Address: 6034 CHESTER AVE SUITE 209
City-St-Zip: JACKSONVILLE, FL 32217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LINN, CHARLOTTE
Address: 3832-10 BAYMEADOWS RD SUITE 351
City-St-Zip: JACKSONVILLE, FL 32217

Title: DVT (X) Change () Addition
Name: RANTZ, JACOB F.
Address: 3832-10 BAYMEADOWS RD SUITE 351
City-St-Zip: JACKSONVILLE, FL 32217

Title: DVS (X) Change () Addition
Name: LINN, JAMES A.,
Address: 3832-10 BAYMEADOWS RD SUITE 351
City-St-Zip: JACKSONVILLE, FL 32217

Title: DVP (X) Change () Addition
Name: RANTZ, BARBARA
Address: 3832-10 BAYMEADOWS RD SUITE 351
City-St-Zip: JACKSONVILLE, FL 32217

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: CHARLOTTE L. LINN

PRES

01/06/2009

Electronic Signature of Signing Officer or Director

Date