

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 375967

FILED
Apr 13, 2009
Secretary of State

Entity Name: ABLE CARPET SERVICE, INC.

Current Principal Place of Business:

619 CASSAT AVENUE
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

619 CASSAT AVENUE
JACKSONVILLE, FL 32205

New Mailing Address:

FEI Number: 59-1310807 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUNION, JOHN
619 CASSAT AVE
JACKSONVILLE, FL 32210 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: P () Delete
Name: JOHN RUNION
Address: 4693 IVANHOE RD
City-St-Zip: JACKSONVILLE, FL 32210

Title: ST () Delete
Name: HELEN ANNETTE HEMINGWAY
Address: 1980 GREENWOOD AVE.
City-St-Zip: JACKSONVILLE, FL 32205

Title: VP () Delete
Name: RUNION, KATHRYN G
Address: 4693 IVANHOE ROAD
City-St-Zip: JACKSONVILLE, FL 32210

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:

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: JOHN RUNION

_____ Electronic Signature of Signing Officer or Director

PRES

04/13/2009

_____ Date