2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 451098

Entity Name: ST. AUGUSTINE SERVICE, INC.

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1961 DOBBS RD. 1961 DOBBS RD

P. O. BOX NO. 187 ST AUG, FL 320865246 ORANGE PARK, FL 320677187

Current Mailing Address: New Mailing Address:

1961 DOBBS RD. 1961 DOBBS RD

P. O. BOX NO. 187 ST AUG, FL 320865246 US ORANGE PARK, FL 320677187

FEI Number: 59-1523179 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SMITH & HULSEY 1800 FLORIDA NAT'L BANK TOWER 225 WATER STREET JACKSONVILLE, FL 32202 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:

Flacture is Oliverature of Devictors of Asset

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: WILLIAMS,W L SR Name: WILLIAMS,W L JR

 Address:
 4720 S.R. 13
 Address:
 1961 DOBBS RD

 City-St-Zip:
 JACKSONVILLE, FL
 City-St-Zip:
 ST AUG, FL 320865246

Title: D () Delete Title: D (X) Change () Addition

 Name:
 WILLIAMS,W.L. JR

 Address:
 1961 DOBBS ROAD

 Name:
 WILLIAMS,W.L. JR

 Address:
 1961 DOBBS ROAD

City-St-Zip: ST. AUGUSTINE, FL 320677187 City-St-Zip: ST. AUGUSTINE, FL 320865246

Title: D () Delete Title: D (X) Change () Addition

Name: PERRETTA, VIRGIE H. Name: PATRICIA A WILLIAMS
Address: 14 BANTON LN Address: 1961 DOBBS RD

City-St-Zip: PALM COAST, FL 32137 City-St-Zip: ST AUGUSTINE, FL 32086

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: W L WILLIAMS JR PRES 04/21/2009