

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 511164

Entity Name: RETSOF SERVICES, INC.

FILED
Apr 02, 2009
Secretary of State

Current Principal Place of Business:

5120 87TH STREET
P.O. BOX 700759
WABASSO, FL 329707759

New Principal Place of Business:

5120 87TH STREET
WABASSO, FL 329707759

Current Mailing Address:

5120 87TH STREET
P.O. BOX 700759
WABASSO, FL 329707759

New Mailing Address:

P. O. BOX 700759
WABASSO, FL 329707759

FEI Number: 59-1683275

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOSTER, THOMAS T
5845 40TH LANE
VERO BEACH, FL 32966 US

Name and Address of New Registered Agent:

FOSTER, JOAN M
5845 40TH LANE
VERO BEACH, FL 32966 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: JOAN M. FOSTER

04/02/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FOSTER, THOMAS T,
Address: 5845 40TH LANE
City-St-Zip: VERO BEACH, FL

Title: STD () Delete
Name: FOSTER, JOAN M,
Address: 5845 40TH LANE
City-St-Zip: VERO BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: KIRST, KATHRYN S.,
Address: 5845 40TH LANE
City-St-Zip: VERO BEACH, FL 32966 US

Title: PD (X) Change () Addition
Name: FOSTER, JOAN M,
Address: 5845 40TH LANE
City-St-Zip: VERO BEACH, FL 32966 US

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: JOAN M. FOSTER

PD

04/02/2009

Electronic Signature of Signing Officer or Director

Date