

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 521109

FILED  
Feb 09, 2009  
Secretary of State

Entity Name: DAYTON ANDREWS SERVICES, INC.

## Current Principal Place of Business:

11440-\*66TH ST  
LARGO, FL 33773

## New Principal Place of Business:

## Current Mailing Address:

2388 GULF TO BAY BLVD  
CLEARWATER, FL 33765

## New Mailing Address:

FEI Number: 59-1723136

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HAGENAU, STEVEN E  
1803 LONGVIEW LANE  
TARPON SPRINGS, FL 34689 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: PD ( ) Delete  
Name: ANDREWS, C TAYLOR,  
Address: 6161-86TH AVE N.  
City-St-Zip: PINELLAS PARK, FL 33782

Title: VD (X) Delete  
Name: ANDREWS, DAYTON T.,  
Address: 440 COUNTRY CLUB ROAD  
City-St-Zip: BELLEAIR, FL 33756

Title: VD ( ) Delete  
Name: ANDREWS, ALFRED B,  
Address: 2225 KENT PL.  
City-St-Zip: CLEARWATER, FL 33764

Title: STD ( ) Delete  
Name: HAGENAU, STEVEN E.,  
Address: 1803 LONGVIEW LANE  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VD ( ) Delete  
Name: ANDREWS, ELLIOTT B  
Address: 575 TRADEWINDS DR  
City-St-Zip: DUNEDIN, FL 34698

## 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:

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: C TAYLOR ANDREWS

P

02/09/2009

Electronic Signature of Signing Officer or Director

Date