

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 524503

FILED
Apr 15, 2009
Secretary of State

Entity Name: MANDARIN SERVICE, INC.

Current Principal Place of Business:

6938 BUSINESS PARK BLVD. N.
P.O. BOX 187 ORANGE PK, FL 32067-1087
JACKSONVILLE, FL 32256

New Principal Place of Business:

6938 BUSINESS PARK BLVD. N.
JACKSONVILLE, FL 32256 US

Current Mailing Address:

6938 BUSINESS PARK BLVD. N.
P.O. BOX 187 ORANGE PK, FL 32067-1087
JACKSONVILLE, FL 32256

New Mailing Address:

6938 BUSINESS PARK BLVD. N.
JACKSONVILLE, FL 32256 US

FEI Number: 59-1722642

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH & HULSEY PROFESSIONAL ASSOCIATION
1800 FLORIDA NAT'L BANK TOWER
225 WATER STREET
JACKSONVILLE, FL 32202 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: VD () Delete
Name: WILLIAMS, W. L. SR.
Address: 4720 S.R. 13
City-St-Zip: JACKSONVILLE, FL

Title: PD () Delete
Name: PERRETTA, VIRGIE H.
Address: 14 BANTON LANE
City-St-Zip: PALM COAST, FL 32137

Title: TD (X) Delete
Name: HARRIS, HARRY JR.
Address: 2747 BLANDING BLVD
City-St-Zip: MIDDLEBURG, FL

Title: SD (X) Delete
Name: WILLIAMS, JEANNE
Address: 4720 S.R. 13
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: WILLIAMS, DORIS A.
Address: 238 TREASURE BEACH RD
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: PD (X) Change () Addition
Name: WILLIAMS, GLENN E.
Address: 238 TREASURE BEACH RD
City-St-Zip: ST. AUGUSTINE, FL 32080

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: GLENN E. WILLIAMS

PD

04/15/2009

Electronic Signature of Signing Officer or Director

Date