

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 658580

FILED
Feb 24, 2009
Secretary of State

Entity Name: GENERAL SPRAY SERVICE, INC.

Current Principal Place of Business:

P.O. BOX 1316
4431 SE 45 RD
OCALA, FL 34480

New Principal Place of Business:

4431 SE 45TH RD
OCALA, FL 34480

Current Mailing Address:

P.O. BOX 1316
4431 SE 45 RD
OCALA, FL 34480

New Mailing Address:

P.O. BOX 1316
OCALA, FL 34478

FEI Number: 59-2013323

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GODWIN, DAVID F.
46050 E 48 PL RD.
OCALA, FL 32671 US

Name and Address of New Registered Agent:

GODWIN, DAVID F.
4605 S E 48 PL RD.
OCALA, FL 34480 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: DAVID F GODWIN

02/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GODWIN, DAVID F.,
Address: 4605 SE 48 PL RD.
City-St-Zip: OCALA, FL

Title: ST () Delete
Name: GODWIN, SHEILA,
Address: 4605 SE 48 PL
City-St-Zip: OCALA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: GODWIN, DAVID F.,
Address: 4605 SE 48 PL RD.
City-St-Zip: OCALA, FL 34480

Title: SEC (X) Change () Addition
Name: GODWIN, SHEILA,
Address: 4605 SE 48 PL
City-St-Zip: OCALA, FL 34480

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: DAVID F. GODWIN

PRES

02/24/2009

Electronic Signature of Signing Officer or Director

Date