2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2009
Secretary of State

DOCUMENT# 686275

Entity Name: CRILLY'S ACCOUNTING SERVICE, INC.

Current Principal Place of Business:

11200 102ND AVE.
UNIT # 97
SEMINOLE, FL 33778 US

New Principal Place of Business:

11200 102ND AVE.
UNIT # 97
LARGO, FL 33778 US

Current Mailing Address:

11200 102ND AVE
UNIT # 97
SEMINOLE, FL 33778 US

New Mailing Address:

11200 102ND AVE.
UNIT # 97
LARGO, FL 33778 US

FEI Number: 59-2022086 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CRILLY, JAMES A
11200 102ND AVE.
UNIT # 97
SEMINOLE, FL 33778 US

Name and Address of New Registered Agent:

CRILLY, JAMES A
11200 102ND AVE.
UNIT # 97
LARGO, FL 33778 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: 02/02/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: CRILLY, JAMES A PD
Address: 8261 141ST STREET N.
City-St-Zip: SEMINOLE, FL

Title: PD ( ) Delete
Name: CRILLY, JAMES A
Address: 11200 102 AVE UNIT 97
City-St-Zip: SEMINOLE, FL 33778

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: CRILLY, JAMES A PD
Address: 8261 141ST STREET N.
City-St-Zip: LARGO, FL 33778 US

Title: PD (X) Change ( ) Addition
Name: CRILLY, JAMES A
Address: 11200 102 AVE UNIT 97
City-St-Zip: LARGO, FL 33778 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: JAMES A. CRILLY PD 02/02/2009
Electronic Signature of Signing Officer or Director — Date