2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 690438

Address:

1132 MADISON AVE

City-St-Zip: DAYTONA BEACH, FL 32114

Entity Name: SESSION SERVICES INC

FILED Jan 14, 2009 Secretary of State

Entity Na	me: SESSION	I SERVICES, INC.		
Current Principal Place of Business:			New Principal Place	of Business:
	NGE AVE., SUI A BEACH, FL 3			
Current Mailing Address:			New Mailing Address:	
P.O BOX DAYTONA	10294 A BEACH, FL 3	321200294		
FEI Number	: 59-2111793	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	Current Registered Agent:	Name and Address of	f New Registered Agent:
1108 LAK	, JOHNNY V EWOOD PARK A BEACH, FL (
	e named entity : e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,
SIGNATU	RE:			
	Electror	ic Signature of Registered Ag	ent	Date
Election Ca	mpaign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SESSION, WIL 1108 LAKEWO		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SESSION, JOH 1108 LAKEWO		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SESSION, THE POB 11294	Delete RESSA CH, FL 321201294	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () GLOVER, VANI 6012 GREENO TALLAHASSEE	N LN RD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	D () MONROE, TYR	Delete ONE P	Title: Name:	() Change () Addition

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.

Address:

City-St-Zip:

SIGNATURE: JOHNNY VAN SESSION PD 01/14/2009