

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006731

FILED
Jan 04, 2007
Secretary of State

Entity Name: AFS SERVICES, INC.

Current Principal Place of Business:

4618 W. SYLVAN RAMBLE STREET
TAMPA, FL 336094238

New Principal Place of Business:

302 KINGHTS RUN AVENUE, SUITE 100
TAMPA, FL 33602

Current Mailing Address:

C/O AFS (D. ROY)
25 ENTERPRISE CENTER, SUITE 200
MIDDLETOWN, RI 028425201

New Mailing Address:

FEI Number: 20-1741320 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEINERS, LOUIS M JR
200 AVIATIONA DRIVE, SUITE 2
NAPLES, FL 34104 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: P () Delete
Name: HARDIMAN, DENNIS
Address: 4618 W. SYLVAN RAMBLE STREET
City-St-Zip: TAMPA, FL 33609

Title: T () Delete
Name: BARBER, ROBERT
Address: 25 ENTERPRISE CENTER, SUITE 200
City-St-Zip: MIDDLETOWN, RI 02842

Title: S () Delete
Name: ROY, DEANNA
Address: 25 ENTERPRISE CENTER, SUITE 200
City-St-Zip: MIDDLETOWN, RI 02842

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HARDIMAN, DENNIS
Address: P.O. BOX 897
City-St-Zip: TAMPA, FL 336010897

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 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: DEANNA M. ROY

S

01/04/2007

Electronic Signature of Signing Officer or Director

_____ Date