

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000293

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: ALL HOWROYD SERVICES COMPANY

## Current Principal Place of Business:

327 WEST BROADWAY  
GLENDALE, CA 91204

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 29048  
GLENDALE, CA 912099048

## New Mailing Address:

FEI Number: 95-4343699

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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: CP ( ) Delete  
Name: JANICE BRYANT HOWROYD  
Address: 1999 WEST 190TH STREET  
City-St-Zip: TORRANCE, CA 90504

Title: VCV ( ) Delete  
Name: BRYANT, CARLTON  
Address: 1999 WEST 190TH STREET  
City-St-Zip: TORRANCE, CA 90504

Title: DT ( ) Delete  
Name: HOYAL, MICHAEL  
Address: 327 WEST BROADWAY  
City-St-Zip: GLENDALE, CA 91204

Title: S ( ) Delete  
Name: BRYANT, TINA  
Address: 1999 WEST 190TH STREET  
City-St-Zip: TORRANCE, CA 90504

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change ( ) Addition  
Name: HOWROYD, JANICE B  
Address: 1999 WEST 190TH STREET  
City-St-Zip: TORRANCE, CA 90504

Title: VD (X) Change ( ) Addition  
Name: BRYANT, CARLTON  
Address: 1999 WEST 190TH STREET  
City-St-Zip: TORRANCE, CA 90504

Title: DT (X) Change ( ) Addition  
Name: HOYAL, MICHAEL A  
Address: 327 WEST BROADWAY  
City-St-Zip: GLENDALE, CA 91204

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: JANICE B. HOWROYD

P

04/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date