

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001403

FILED
Jan 07, 2009
Secretary of State

Entity Name: AXIS VEHICLE SERVICES, INC.

Current Principal Place of Business:

C/O AXIS GROUP
2302 PARKLAKE DRIVE
ATLANTA, GA 30345

New Principal Place of Business:

C/O AXIS GROUP
2302 PARKLAKE DRIVE, SUITE 400
ATLANTA, GA 30345

Current Mailing Address:

C/O AXIS GROUP
2302 PARKLAKE DRIVE
ATLANTA, GA 30345

New Mailing Address:

C/O AXIS GROUP
2302 PARKLAKE DRIVE, SUITE 400
ATLANTA, GA 30345

FEI Number: 38-2918187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: HARRINGTON, JOHN
Address: 2302 PARKLAKE DRIVE
City-St-Zip: ATLANTA, GA 30345

Title: VS () Delete
Name: FLEMING, ROBERT
Address: 2302 PARKLAKE DRIVE
City-St-Zip: ATLANTA, GA 30345

Title: T () Delete
Name: MACAULAY, SCOTT
Address: 2302 PARKLAKE DRIVE
City-St-Zip: ATLANTA, GA 30345

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WELLENS, FRANK
Address: 2302 PARKLAKE DRIVE
City-St-Zip: ATLANTA, GA 30345

Title: S (X) Change () Addition
Name: PAGLIARULO, ENZO
Address: 2302 PARKLAKE DRIVE
City-St-Zip: ATLANTA, GA 30345

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: BLOUNT, JOHN F
Address: 2302 PARKLAKE DRIVE, SUITE 600
City-St-Zip: ATLANTA, GA 30345

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: FRANK WELLENS

P

01/07/2009

Electronic Signature of Signing Officer or Director

Date