2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2009
Secretary of State

DOCUMENT# F90207

Entity Name: ADVANCED OVERHEAD SYSTEMS INCORPORATED

Current Principal Place of Business:

3510 CRAFTSMAN BLVD
PO BOX 5498
LAKELAND, FL 33807

New Principal Place of Business:

3510 CRAFTSMAN BLVD
3510 CRAFTSMAN BLVD.
LAKELAND, FL 33803

Current Mailing Address:

3510 CRAFTSMAN BLVD
PO BOX 5498
LAKELAND, FL 33807

New Mailing Address:

3510 CRAFTSMAN BLVD
PO BOX 5498
LAKELAND, FL 338075498

FEI Number: 59-3193520 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARRELL, WILLIAM Y
4910 LUCE ROAD
LAKELAND, FL 338132328 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: VD ( ) Delete
Name: HARRELL, WILLIAM Y,
Address: 4910 LUCE ROAD
City-St-Zip: LAKELAND, FL 338132328

Title: STD ( ) Delete
Name: HARRELL, MARY E
Address: 4910 LUCE ROAD
City-St-Zip: LAKELAND, FL 338132328

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D ( ) Change (X) Addition
Name: HARRELL, STUART K
Address: 3014 FOREST CLUB DRIVE
City-St-Zip: PLANT CITY, FL 33566

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: WILLIAM Y. HARRELL VP 03/10/2009

Electronic Signature of Signing Officer or Director — Date