

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005064

**FILED**  
**Jan 18, 2010**  
**Secretary of State**

**Entity Name:** SPECIALIZED SERVICES INC.

**Current Principal Place of Business:**

1791 O.G. SKINNER DRIVE  
SUITE D  
WEST POINT, GA 31833

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 557  
WEST POINT, GA 31833

**New Mailing Address:**

**FEI Number:** 58-2002558

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

FARNER BARLEY & ASSOC., INC  
4450 NE 83RD RD  
WILDWOOD, FL 34781 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  
**Name:** GRAHAM, TED  
**Address:** 1791 O.G. SKINNER DRIVE  
**City-St-Zip:** WEST POINT, GA 31833

**Title:** ST  
**Name:** POROSKY, SHIRLEY  
**Address:** 1791 O.G. SKINNER DRIVE  
**City-St-Zip:** WEST POINT, GA 31833

**Title:** CFO  
**Name:** DAVENPORT, MCKENZIE A MR.  
**Address:** 1791 O.G. SKINNER DRIVE  
**City-St-Zip:** WEST POINT, GA 31833

I hereby 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 all other like empowered.

**SIGNATURE:** MCKENZIE A. DAVENPORT

CFO

01/18/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date