

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 25, 2008 8:00 am
Secretary of State

01-25-2008 90033 039 ***150.00

DOCUMENT # G07747

1. Entity Name
LEGAL SERVICES, INC.



Principal Place of Business
**801 N. MAGNOLIA AVENUE
SUITE 208 316-C
ORLANDO, FL 32803**

Mailing Address
**801 N. MAGNOLIA AVENUE
SUITE 208 316-C
ORLANDO, FL 32803**



01192008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2316566

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**JUNKER, C. RICHARD
801 N. MAGNOLIA AVENUE
SUITE 208 316-C
ORLANDO, FL 32803**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	JUNKER, C. RICHARD
STREET ADDRESS	801 N. MAGNOLIA AVENUE
CITY - ST - ZIP	ORLANDO, FL 32803
TITLE	D
NAME	JUNKER, ELIZABETH
STREET ADDRESS	801 N. MAGNOLIA AVENUE
CITY - ST - ZIP	ORLANDO, FL 32803
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Elizabeth Junker

Elizabeth Junker

1-19-08

Date

407-843-2245

Daytime Phone #