2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H36176

Entity Name: LEGAL SECRETARIAL SERVICES, INC.

FILED Jan 13, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4019 MCLAUGHLIN DRIVE 4019 MCLAUGHLIN DRIVE P.O. BOX 12891 TALLAHASSEE, FL 32309 TALLAHASSEE, FL 32317

Current Mailing Address: New Mailing Address:

4019 MCLAUGHLIN DRIVE P. O. BOX 12891 P.O. BOX 12891 TALLAHASSEE, FL 32317 TALLAHASSEE, FL 32317

FEI Number: 59-2480391 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KNEECE, MARY R.
4019 MCLAUGHLIN DRIVE
TALLAHASSEE, FL 32308 US
KNEECE, MARY R.
4019 MCLAUGHLIN DRIVE
TALLAHASSEE, FL 32309 US

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: 01/13/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST () Delete Title: PST (X) Change () Addition

 Name:
 KNEECE, W.C., JR.,
 Name:
 KNEECE, W.C., JR.,

 Address:
 4019 MCLAUGHLIN DRIVE
 Address:
 4019 MCLAUGHLIN DRIVE

 City-St-Zip:
 TALLAHASSEE, FL
 City-St-Zip:
 TALLAHASSEE, FL
 32309

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: KNEECE, W.C., JR. PST 01/13/2009