

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J10892

Entity Name: STRETCHER LIMO, INC.

FILED
Apr 14, 2009
Secretary of State

Current Principal Place of Business:

6030 MASSACHUSETTS AVE
NEW PORT RICHEY, FL 346532524 US

New Principal Place of Business:

Current Mailing Address:

6030 MASSACHUSETTS AVE
NEW PORT RICHEY, FL 346532524 US

New Mailing Address:

FEI Number: 59-2680050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, DENNIS
3732 MONT CLAIR DR
NEW PORT RICHEY, FL 34655 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: DP () Delete
Name: SPIVEY, JO LYN
Address: 16003 CHASTAIN RD
City-St-Zip: ODESSA, FL 33556

Title: D () Delete
Name: SMITH, DENNIS
Address: 3732 MONTCLAIR DR
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: D () Delete
Name: SMITH, DOLORES
Address: 4525 GLEN HOLLOW
City-St-Zip: NEW PORT RICHEY, FL 34653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JOLYN SPIVEY

P

04/14/2009

Electronic Signature of Signing Officer or Director

Date