

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J66954

FILED
Feb 04, 2009
Secretary of State

Entity Name: PHOENIX SALES AND SERVICES, INC.

Current Principal Place of Business:

3241 OLD WINTER GARDEN ROAD
SUITE 27
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

3241 OLD WINTER GARDEN ROAD
SUITE 27
ORLANDO, FL 32805

New Mailing Address:

FEI Number: 59-2844995

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, BLAIR M PA
425 SOUTH DILLARD STREET
WINTER GARDEN, FL 34787 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: BLADES, BERT JAMES,
Address: 12250 FAIRGLEN ROAD
City-St-Zip: LEBANON, MO 65536

Title: ST () Delete
Name: BLADES, DEBORAH SUZA, NNE
Address: 12250 FAIRGLEN ROAD
City-St-Zip: LEBANON, MO 65536

Title: VPO () Delete
Name: WHITE, GARRY E
Address: 3241 OLD WINTER GARDEN ROAD, #27
City-St-Zip: ORLANDO, FL 32895

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ST (X) Change () Addition
Name: BLADES, BERT JAMES,
Address: 12250 FAIRGLEN ROAD
City-St-Zip: LEBANON, MO 65536

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: BERT JAMES BLADES

DP

02/04/2009

Electronic Signature of Signing Officer or Director

_____ Date