2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K83027

FILED Apr 28, 2008 Secretary of State

Entity Name: COUNTY COURT PROBATION SERVICES, INC.

Current Principal Place of Business:

New Principal Place of Business:

Strate of Business:

New Principal Place of Business:

New Principal Place of Business:

P O BOX 1619 CROSS CITY, FL 32628 US

FEI Number: 59-2957389 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:

 LILES, HELEN
 312 MAIN ST
 37 SE 276TH ST

 CROSS CITY, FL 32628
 US
 CROSS CITY, FL 32628
 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: HELEN LILES 04/28/2008

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: () Change () Addition

 Name:
 LILES, HELEN
 Name:

 Address:
 PO BOX 1619
 Address:

 City-St-Zip:
 CROSS CITY, FL 32628
 City-St-Zip:

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

 Name:
 LILES, HELEN
 Name:
 LILES, HELEN

 Address:
 312 MAIN ST.
 Address:
 37 SE 276TH ST

 City-St-Zip:
 CROSS CITY, FL
 City-St-Zip:
 CROSS CITY, FL

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: HELEN LILES PST 04/28/2008