

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L50114

FILED
Apr 11, 2009
Secretary of State

Entity Name: ABELE TREE MOVERS, INC.

Current Principal Place of Business:

5011 DALEHURST DR
COCOA, FL 32926

New Principal Place of Business:

Current Mailing Address:

5011 DALEHURST DR
COCOA, FL 32926

New Mailing Address:

FEI Number: 59-2996875

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLOVER, JUDITH M
5011 DALEHURST DR.
COCOA, FL 32926 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: PD () Delete
Name: GLOVER, JUDITH M
Address: 5011 DALEHURST DR.
City-St-Zip: COCOA, FL 32926

Title: STD () Delete
Name: GLOVER, JUDITH M
Address: 5011 DALEHURST DR
City-St-Zip: COCOA, FL 32926

Title: VD () Delete
Name: MCDANIEL, ANITA S
Address: P.O. BOX 541539
City-St-Zip: MERRITT ISLAND, FL 329541539

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PSTD (X) Change () Addition
Name: GLOVER, JUDITH M
Address: 5011 DALEHURST DR
City-St-Zip: COCOA, FL 32926

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: JUDITH M. GLOVER

PSTD

04/11/2009

Electronic Signature of Signing Officer or Director

Date