

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L65581

FILED
Feb 10, 2010
Secretary of State

Entity Name: SYMBIONT SERVICE CORPORATION

Current Principal Place of Business:

4372 NORTH ACCESS ROAD
ENGLEWOOD, FL 34224

New Principal Place of Business:

Current Mailing Address:

4372 NORTH ACCESS ROAD
ENGLEWOOD, FL 34224

New Mailing Address:

FEI Number: 65-0186071

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KORSZEN, DOROTHY L ESQ.
99 NESBIT STREET
PUNTA GORDA, FL 33950 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: PS
Name: KING, SANDRA L
Address: 1054 SCHOONER LANE
City-St-Zip: ENGLEWOOD, FL 34224

Title: VP
Name: KING, SANDRA L
Address: 1054 SCHOONER LANE
City-St-Zip: ENGLEWOOD, FL 34224

Title: S
Name: KING, SANDRA L
Address: 1054 SCHOONER LANE
City-St-Zip: ENGLEWOOD, FL 34224

Title: T
Name: KING, SANDRA L
Address: 1054 SCHOONER LANE
City-St-Zip: ENGLEWOOD, FL 34224

Title: D
Name: KING, SANDRA L
Address: 1054 SCHOONER LANE
City-St-Zip: ENGLEWOOD, FL 34224

Title: D
Name: KING, MARK A
Address: 704 WAKEFIELD AVENUE
City-St-Zip: CINCINNATI, OH 45208

I hereby 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 all other like empowered.

SIGNATURE: SANDRA L. KING

PS

02/10/2010

Electronic Signature of Signing Officer or Director

Date