

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007687

FILED
Jun 01, 2009
Secretary of State

Entity Name: REGENCY INTERNATIONAL SERVICES, INC.

Current Principal Place of Business:

1963 ERIN BROOK DRIVE.
TAMPA, FL 33594

New Principal Place of Business:

1961 ERIN BROOK DRIVE.
TAMPA, FL 33594

Current Mailing Address:

P.O. BOX 25201
TAMPA, FL 33622

New Mailing Address:

FEI Number: 59-3673804 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LEATH, ALICE
1961 ERIN BROOK DRIVE
VALRICO, FL 33594 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BARNES, YVONNE
Address: 1961 ERIN BROOK DR.
City-St-Zip: VALRICO, FL 33594

Title: VP () Delete
Name: LEATH, ALICE
Address: 1961 ERIN BROOK DR.
City-St-Zip: VALRICO, FL 33594

Title: D () Delete
Name: BURNEY, AYESHIA
Address: 2402 N. HIGHLAND AVE.
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: REEDY, BEVERLY
Address: 601 PALM AVE.
City-St-Zip: TAMPA, F; 33607

Title: D () Delete
Name: VALDEZ, GARY
Address: P.O. BOX 25201
City-St-Zip: TAMPA, FL 33622

Title: D () Delete
Name: ANDERSON, RONALD
Address: P.O. BOX 25201
City-St-Zip: TAMPA, FL 33622

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:

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

Title: D (X) Change () Addition
Name: NANCE, JAVON
Address: P.O. BOX 25201
City-St-Zip: TAMPA, FL 33622

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: YVONNE BARNES

P

06/01/2009

Electronic Signature of Signing Officer or Director

Date