2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2011
Secretary of State

DOCUMENT# N05000011607

Entity Name: ASSISTANCE & SERVICES INC

Current Principal Place of Business:

12011 NW 31 ST DRIVE
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

12011 NW 31 ST DRIVE
CORAL SPRINGS, FL 33065 US

New Mailing Address:

FEI Number: 20-3779109 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LAWSON, ROSA J
12011 NW 31 ST DRIVE
CORAL SPRINGS, FL US 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

OFFICERS AND DIRECTORS:

Title: DR
Name: LAWSON, ROSA J
Address: 12011 NW 31 ST DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: DR
Name: LAWSON, ROSA J
Address: 12011 NW 31 ST DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: DR
Name: LAWSON, ROSA J
Address: 12011 NW 31 ST DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: C
Name: KENNEDY, ARTHUR
Address: POST OFFICE BOX 8974
City-St-Zip: CORAL SPRINGS, FL 33965

Title: ST
Name: MERRITT, ROSE
Address: POST OFFICE BOX 8974
City-St-Zip: CORAL SPRINGS, FL 33965

Title: FC
Name: WEST, CHUCK
Address: POST OFFICE BOX 8974
City-St-Zip: CORAL SPRINGS, FL 33075

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

SIGNATURE: ROSA J LAWSON DR 01/06/2011

Electronic Signature of Signing Officer or Director Date