

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005393

FILED
Apr 19, 2009
Secretary of State

Entity Name: SERVICETECHHELP ASSOCIATION, INC

Current Principal Place of Business:

4803 ARROWWOOD DR
TAMPA, FL 33615

New Principal Place of Business:

6161 MEMORIAL HWY
1609
TAMPA, FL 33615

Current Mailing Address:

4803 ARROWWOOD DR
TAMPA, FL 33615

New Mailing Address:

6161 MEMORIAL HWY
1609
TAMPA, FL 33615

FEI Number: 26-2748924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE LAW OFFICES OF NICK SPRADLIN, PLLC
12000 NORTH DALE MABRY HWY
SUITE 110
TAMPA, FL 33618 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: DPT () Delete
Name: MURRAY, ROY
Address: 4803 ARROWWOOD DR
City-St-Zip: TAMPA, FL 33615

Title: DVS () Delete
Name: KELLY, PEGI A
Address: 4803 ARROWWOOD DR
City-St-Zip: TAMPA, FL 33615

Title: D () Delete
Name: YOUNG, SHANE
Address: 4803 ARROWWOOD DR
City-St-Zip: TAMPA, FL 33615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: MURRAY, ROY
Address: 6161 MEMORIAL HWY UNIT 1609
City-St-Zip: TAMPA, FL 33615

Title: DVS (X) Change () Addition
Name: KELLY, PEGI A
Address: 6161 MEMORIAL HWY UNIT 1609
City-St-Zip: TAMPA, FL 33615

Title: D (X) Change () Addition
Name: YOUNG, SHANE
Address: 6161 MEMORIAL HWY UNIT 1609
City-St-Zip: TAMPA, FL 33615

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: ROY MURRAY

PRES

04/19/2009

Electronic Signature of Signing Officer or Director

Date