2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2008
Secretary of State

DOCUMENT# P00000004956

Entity Name: E.A.C. SERVICES INC.

Current Principal Place of Business:

3929 BLUEBELL STREET
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

3929 BLUEBELL STREET
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 65-0981720 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EATON, JACQUELINE
3929 BLUEBELL STREET
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

EATON, WILLIAM
3929 BLUEBELL STREET
PALM BEACH GARDENS, FL 33410 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: WILLIAM R EATON 04/15/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: EATON, JACQUELINE A
Address: 3929 BLUEBELL ST
City-St-Zip: WEST PALM BEACH, FL 33410 US

Title: VP ( ) Delete
Name: EATON, WILLLIAM R
Address: 3929 BLUEBELL ST
City-St-Zip: WEST PALM BEACH, FL 33410 US

Title: S ( ) Delete
Name: EATON, JACQUELINE A
Address: 3929 BLUEBELL STREET
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: T ( ) Delete
Name: EATON, JACQUELINE
Address: 3429 BLUEBELL ST
City-St-Zip: WEST PALM BEACH, FL 33410

Title: S ( ) Delete
Name: EATON, JACQUELINE A
Address: 3929 BLUEBELL ST
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition
Name: EATON, WILLIAM R
Address: 3929 BLUEBELL STREET
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: T (X) Change ( ) Addition
Name: EATON, WILLIAM
Address: 3429 BLUEBELL ST
City-St-Zip: WEST PALM BEACH, FL 33410

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: WILLIAM R EATON VP 04/15/2008
Electronic Signature of Signing Officer or Director Date