

2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000013099

FILED
Jun 21, 2010
Secretary of State

Entity Name: ARLINGTON ENVIRONMENTAL SERVICES, INC.

Current Principal Place of Business:

605 SW PARK STREET
209
OKEECHOBEE, FL 34974

New Principal Place of Business:

605 S.W. PARK STREET
209
OKEECHOBEE, FL 34974

Current Mailing Address:

605 SW PARK STREET
209
OKEECHOBEE, FL 34974

New Mailing Address:

POST OFFICE BOX 657
OKEECHOBEE, FL 34973

FEI Number: 65-0987645

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARLINGTON, WILLIAM D
1180 S.E. 23RD ST.
OKEECHOBEE, FL 34974 US

Name and Address of New Registered Agent:

RLINGTON, WILLIAM D
605 S.W. PARK STREET
209
OKEECHOBEE, FL 34974 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 D. ARLINGTON

06/21/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: ARLINGTON, OLIVIA K
Address: POST OFFICE BOX 657
City-St-Zip: OKEECHOBEE, FL 34973

Title: VP
Name: ARLINGTON, OLIVIA K
Address: POST OFFICE BOX 657
City-St-Zip: OKEECHOBEE, FL 34973

Title: T
Name: ARLINGTON, WILLIAM D
Address: POST OFFICE BOX 657
City-St-Zip: OKEECHOBEE, FL 34973

Title: S
Name: HANDLEY, STACEY W
Address: POST OFFICE BOX 657
City-St-Zip: OKEECHOBEE, FL 34973

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: OLIVIA KAYE ARLINGTON

P

06/21/2010

Electronic Signature of Signing Officer or Director

Date