2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000045151

Entity Name: AMITY SERVICES, INC.

FILED Feb 15, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

17561 69TH STREET NORTH 590 ROYAL PALM BEACH BLVD.
LOXAHATCHEE, FL 33470 ROYAL PALM BEACH, FL 33411 US

Current Mailing Address: New Mailing Address:

17561 69TH STREET NORTH POST OFFICE BOX 4326 LOXAHATCHEE, FL 33470 WEST PALM BEACH, FL 33402

FEI Number: 65-1016876 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BARITON, JACK

100 S. PINE ISLAND RD., #108

PLANTATION, FL 33324 US

LAMPERT, JEFFREY

590 ROYAL PALM BEACH BLVD.

ROYAL PALM BEACH, FL 33411 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: JEFFREY B. LAMPERT 02/15/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HARRINGTON, ROBERT

Address: 17561 69TH STREET NORTH City-St-Zip: LOXAHATCHEE, FL 33470

Title: P () Delete
Name: BLAIN, DEBRA

Address: 17561 69TH STREET N City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition

Name: HARRINGTON, ROBERT

Address: P. O. BOX 4326

City-St-Zip: WEST PALM BEACH, FL 33402 US

Title: P (X) Change () Addition

Name: BLAIN, DEBRA Address: P. O. BOX 4326

City-St-Zip: WEST PALM BEACH, FL 33402 US

I hereby certify that the information supplied with this filing does not qualify for the 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: DEBRA BLAIN PRES 02/15/2007