

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000076896

FILED
Jan 06, 2012
Secretary of State

Entity Name: SANDERS SCREENING AND REPAIR, INC.

Current Principal Place of Business:

5799 SE AULT AVE
STUART, FL 34997 77

New Principal Place of Business:

5799 SE AULT AVE
5799 SE AULT AVE
STUART, FL 34997 77

Current Mailing Address:

5799 SE AULT AVE
STUART, FL 34997 77

New Mailing Address:

FEI Number: 65-1042280 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SANDERS, ROBERT W
5799 SE AULT AVE
STUART, FL 34997 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: T
Name: SANDERS, ELIZABETH P
Address: 5799 SE AULT AVE
City-St-Zip: STUART, FL 34997 77

Title: P
Name: ROBERT, SANDERS W SR
Address: 5799 SE AULT AVE
City-St-Zip: STUART, FL 34997 77

Title: P
Name: SANDERS, ROBERT W SR
Address: 5799 SE AULT AVE
City-St-Zip: STUART, FL 34997 77

Title: P
Name: SANDERS, ROBERT W SR
Address: 5799 SE AULT AVE
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Title: P
Name: SANDERS, ROBERT W SR
Address: 5799 SE AULT AVE
City-St-Zip: STUART, FL 34997 77

Title: P
Name: SANDERS, ROBERT W SR
Address: 5799 SE AULT AVE
City-St-Zip: STUART, FL 34997 77

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: ROBERT W SANDERS

OWNE

01/06/2012

Electronic Signature of Signing Officer or Director

Date