

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000091232

Entity Name: ACCURATE GRADING, INC.

FILED
Apr 19, 2007
Secretary of State

Current Principal Place of Business:

17162 ALICO CENTER RD.
#3
FORT MYERS, FL 33912

Current Mailing Address:

17162 ALICO CENTER RD.
#3
FORT MYERS, FL 33912

New Principal Place of Business:

17162 ALICO CENTER RD.
#3
FORT MYERS, FL 33967

New Mailing Address:

17162 ALICO CENTER RD.
#3
FORT MYERS, FL 33967

FEI Number: 65-1036949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARKER, JR., FRANKLIN W PRES
17162 ALICO CENTER RD.
#3
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

BARKER, JR., FRANKLIN W PRES
17162 ALICO CENTER RD.
#3
FORT MYERS, FL 33967 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: FRANKLIN W. BARKER, JR.

04/19/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BARKER, FRANKLIN W JR
Address: 1541 LOGAN COURT
City-St-Zip: NAPLES, FL 34116

Title: ST () Delete
Name: BARKER, BARBARA A
Address: 1541 LOGAN COURT
City-St-Zip: NAPLES, FL 34116

Title: VP () Delete
Name: BARKER, TRAVIS W
Address: 1541 LOGAN CT.
City-St-Zip: NAPLES, FL 34116

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: BARBARA A. BARKER

ST

04/19/2007

Electronic Signature of Signing Officer or Director

Date