2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000091232

Address:

City-St-Zip:

1541 LOGAN CT.

NAPLES, FL 34116

Entity Name: ACCURATE GRADING, INC

FILED Apr 25, 2008 Secretary of State

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Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
17162 ALICO CENTER RD. #3 FORT MYERS, FL 33967			1541 LOGAN CT. NAPLES, FL 34116	US	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
17162 ALICO CENTER RD. #3 FORT MYERS, FL 33967			1541 LOGAN CT. NAPLES, FL 34116	US	
FEI Number:	: 65-1036949	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	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 the State of Florida.			BARKER, JR., FRANI 1541 LOGAN CT. NAPLES, FL 34116 ourpose of changing its registere	US	
SIGNATUR				04/25/2008	
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () BARKER, FRAN 1541 LOGAN C NAPLES, FL 34	DURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () BARKER, BARE 1541 LOGAN C NAPLES, FL 34	DURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VP () BARKER, TRAV	Delete IS W	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: BARBARA A. BARKER S,T 04/25/2008