2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000042807

Entity Name: ARLINGTON BODY COMPANY, INC.

FILED Jan 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:		of Business:	
1529 MARCHECK STREET JACKSONVILLE, FL 32211			
Current Mailing Address:	New Mailing Address:		
1529 MARCHECK STREET JACKSONVILLE, FL 32211			
FEI Number: 59-3714275 FEI Number Applied For ()	El Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			
ALLEN, RONALD 1529 MARCHECK STREET JACKSONVILLE, FL 32211 US	ALLEN, RONALD 1529 MARCHECK STREET JACKSONVILLE, FL 322115251 US		
The above named entity submits this statement for the purpoin the State of Florida.	ose of changing its registered	d office or registered agent, or both,	
SIGNATURE:		01/19/2009	
Electronic Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: D () Delete Name: ALLEN, RONALD Address: 1529 MARCHECK STREET Citv-St-Zip: JACKSONVILLE, FL 32211	Name: ALLEN, RON Address: 1529 MARCI	(X) Change()Addition IALD L HECK STREET LLE. FL 32211	

Title:

Name:

Address:

City-St-Zip:

JACKSONVILLE, FL 32211 City-St-Zip: Title: () Delete Name: ALLEN, DONNA 3750 MANOR OAKS DR. Address: City-St-Zip: JACKSONVILLE, FL 32277

ALLEN, WILMA

1529 MARCHECK ST.

() Delete

Title:

Name:

Address:

Title: () Delete ALLEN, NATHAN Name: Address: 3750 MANOR OAKS DR. City-St-Zip: JACKSONVILLE, FL 32277

Title: () Delete ALLEN, FLOYD Name: Address: 1529 MARCHECK ST. JACKSONVILLE, FL 32211 City-St-Zip:

JACKSONVILLE, FL 32211 Title: (X) Change () Addition

ALLEN, WILMA M

1529 MARCHECK ST.

(X) Change () Addition

Name: ALLEN, DONNA M Address: 3750 MANOR OAKS DR. City-St-Zip: JACKSONVILLE, FL 32277

Title: (X) Change () Addition

ALLEN, NATHAN L Name: Address: 3750 MANOR OAKS DR. City-St-Zip: JACKSONVILLE, FL 32277

Title: (X) Change () Addition

ALLEN, FLOYD E Name: Address: 1529 MARCHECK ST. City-St-Zip: JACKSONVILLE, FL 32211

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.

SIGNATURE: RONALD L. ALLEN 01/19/2009 D