

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000100298

FILED
Apr 28, 2009
Secretary of State

Entity Name: STRICKLAND MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

1104 N. PARSONS AVE
SUITE E
BRANDON, FL 33510

New Principal Place of Business:

Current Mailing Address:

1104 N. PARSONS AVE
SUITE E
BRANDON, FL 33510

New Mailing Address:

FEI Number: 36-4476602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRICKLAND, HENRY S
1104 N. PARSONS AVE
SUITE E
BRANDON, FL 33510 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STRICKLAND, HENRY SCOTT
Address: 1010 HICKORY FORK DRIVE
City-St-Zip: SEFFNER, FL 33584

Title: VD () Delete
Name: WILLIAMS, T. LAYNE
Address: 602 GAY ROAD
City-St-Zip: SEFFNER, FL 33584

Title: SD (X) Delete
Name: BRADLEY, EDWARD J
Address: 5937 JAEGER GLEN DRIVE
City-St-Zip: LITHIA, FL 33547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STRICKLAND, HENRY SCOTT
Address: 509 SPORTSMAN PARK DRIVE
City-St-Zip: SEFFNER, FL 33584

Title: VD (X) Change () Addition
Name: LYNN, STRICKLAND
Address: 509 SPORTSMAN PARK DRIVE
City-St-Zip: SEFFNER, FL 33584

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

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: HENRY S STRICKLAND

PRES

04/28/2009

Electronic Signature of Signing Officer or Director

Date