

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015161

FILED
Apr 28, 2009
Secretary of State

Entity Name: CUSTOM LAGOON SERVICES, INC.

Current Principal Place of Business:

11462 SR 51
LIVE OAK, FL 320640476

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 476
LIVE OAK, FL 320640476

New Mailing Address:

FEI Number: 65-1180378

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALEY, WILLIAM J
116 NW COLUMBIA AVE.
LAKE CITY, FL 32055 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: D () Delete
Name: JOHNSON, CINDY G
Address: P.O. BOX 476
City-St-Zip: LIVE OAK, FL 320640476

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JOHNSON, CINDY G
Address: 11462 SR 51
City-St-Zip: LIVE OAK, FL 32060

Title: P () Change (X) Addition
Name: JOHNSON, CINDY G
Address: 11462 SR 51
City-St-Zip: LIVE OAK, FL 32060

Title: VP () Change (X) Addition
Name: JOHNSON, CINDY G
Address: 11462 SR 51
City-St-Zip: LIVE OAK, FL 32060

Title: S () Change (X) Addition
Name: JOHNSON, CINDY G
Address: 11462 SR 51
City-St-Zip: LIVE OAK, FL 32060

Title: T () Change (X) Addition
Name: JOHNSON, LARRY C
Address: 11462 SR 51
City-St-Zip: LIVE OAK, FL 32060

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: CINDY GAIL JOHNSON

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date