

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000143624

FILED  
May 14, 2009  
Secretary of State

**Entity Name:** STEVEN ELLYSON'S PRESSURE WASHING, INC.

**Current Principal Place of Business:**

13573 LITTLE GEM CIRCLE  
FORT MYERS, FL 33913

**New Principal Place of Business:**

17450 TAYLOR RD.  
ALVA, FL 33920

**Current Mailing Address:**

13573 LITTLE GEM CIRCLE  
FORT MYERS, FL 33913

**New Mailing Address:**

17450 TAYLOR RD.  
ALVA, FL 33920

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ELLYSON, STEVEN R  
13573 LITTLE GEM CIRCLE  
FORT MYERS, FL 33913    US

**Name and Address of New Registered Agent:**

ELLYSON, STEVEN R  
17450 TAYLOR RD.  
ALVA, FL 33920    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: STEVEN R ELLYSON

05/14/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title:            PSTD            ( ) Delete  
Name:           ELLYSON, STEVEN R  
Address:        13573 LITTLE GEM CIRCLE  
City-St-Zip:    FORT MYERS, FL 33913

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:            PSTD            (X) Change ( ) Addition  
Name:           ELLYSON, STEVEN R  
Address:        17450 TAYLOR RD.  
City-St-Zip:    ALVA, FL 33920

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: STEVEN R ELLYSON

PSTD

05/14/2009

Electronic Signature of Signing Officer or Director

Date