

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000148225

FILED
May 01, 2009
Secretary of State

Entity Name: SPECIALIZED LOGISTICS SERVICE, INC

Current Principal Place of Business:

625 WEST BRIDGERS AVE
AUBURNDALE, FL 33823

New Principal Place of Business:

Current Mailing Address:

PO BOX 1643
WINTER HAVEN, FL 33882

New Mailing Address:

FEI Number: 20-0355211

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADDISON, BILLY REED
625 W BRIDGERS AVE.
AUBURNDALE, FL 33823 US

Name and Address of New Registered Agent:

ADDISON, BILLY R
625 W BRIDGERS AVE.
AUBURNDALE, FL 33823 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: BILLY ADDISON

05/01/2009

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: D () Delete
Name: ADDISON, BILLY REED
Address: 625 WEST BRIDGERS AVE
City-St-Zip: AUBURNDALE, FL 33823

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ADDISON, BILLY R
Address: 625 WEST BRIDGERS AVE
City-St-Zip: AUBURNDALE, FL 33823

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: BILLY ADDISON

PRES

05/01/2009

Electronic Signature of Signing Officer or Director

Date