

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000155666

FILED
Feb 06, 2009
Secretary of State

Entity Name: FLORIDA BUSINESS TRANSFER SPECIALISTS, INC.

Current Principal Place of Business:

2420 N. CRSTAL LAKE DRIVE
SUITE 100
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 1453
EATON PARK, FL 338401453

New Mailing Address:

2420 N. CRSTAL LAKE DRIVE
SUITE 100
LAKELAND, FL 33801

FEI Number: 02-0713423

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANATECH SERVICES LLC
2420 N CRYSTAL LAKE DR
SUITE 100
LAKELAND, FL 33801 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: P () Delete
Name: DUFRESNE, CELINE
Address: 5122 NORSHORE DR
City-St-Zip: POLK CITY, FL 33868

Title: V () Delete
Name: BOULAIS, LUC
Address: 5122 NORTSHORE DR
City-St-Zip: POLK CITY, FL 33868

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DUFRESNE, CELINE
Address: 333 THORNHILL ESTATES CT
City-St-Zip: WINTER HAVEN, FL 33880

Title: V (X) Change () Addition
Name: BOULAIS, LUC
Address: 333 THORNHILL ESTATES CT
City-St-Zip: WINTER HAVEN, FL 33880

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: CELINE DUFRESNE

PRES

02/06/2009

Electronic Signature of Signing Officer or Director

Date