

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000021640

Entity Name: CROSS-CUT SHREDDING, INC.

FILED
Mar 02, 2007
Secretary of State

Current Principal Place of Business:

680 ATLANTIS ROAD
MELBOURNE, FL 32904

New Principal Place of Business:

Current Mailing Address:

680 ATLANTIS ROAD
MELBOURNE, FL 32904

New Mailing Address:

FEI Number: 61-1464912

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORBETT, JEANNETTE M
680 ATLANTIS ROAD
MELBOURNE, FL 32904 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CORBETT, JEANNETTE M
Address: P.O. BOX 510512
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: S (X) Delete
Name: HAWORTH, JAMES C
Address: 1141 SE 8TH ST.
City-St-Zip: OCALA, FL 34471

Title: VP () Delete
Name: MYERS, JAMES P
Address: 4500 S. ATLANTIC AVE.
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VP () Delete
Name: MIRTH, KEVIN T
Address: 126 DELVALLE ST.
City-St-Zip: MELBOURNE BEACH, FL 32951

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP/S (X) Change () Addition
Name: MYERS, JAMES P
Address: 4500 S. ATLANTIC AVE.
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES P MYERS

VP

03/02/2007

Electronic Signature of Signing Officer or Director

Date