## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000033038

Entity Name: A & E SUPPORT SERVICES, INC.

FILED Mar 18, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place of Business:	
	NWOOD LANE S, FL 33907	E, #104		
Current Mailing Address:			New Mailing Address:	
	NWOOD LANE S, FL 33907	E, #104		
FEI Number	: 65-0360689	FEI Number Applied For()	FEI Number Not Applicable()	Certificate of Status Desired ( )
Name and	l Address of (	Current Registered Agent:	Name and Address of	of New Registered Agent:
5601 CHE #103	CH, DONALD LSEY LANE ERS, FL 3391	2 US		
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,
SIGNATUI	RE:			
	Electron	nic Signature of Registered Ag	ent	Date
Election Car	mpaign Financin	g Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	VP ( BURGESS, JO 6292 MORGAN FT. MYERS, FI	I LA FEE LANE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	PRES ( GOODRICH, D 5601 CHELSE' FORT MYERS,	Y LANE, #103	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	VP ( STEWART, MIC 1219 SW 53RI CAPE CORAL,	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP ( TONGE, ORAM 7575 SAN MIG NAPLES, FL 3	UEL WAY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title:	SECR (X	) Delete	Title:	( ) Change ( ) Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MICHAEL STEWART VP 03/18/2009

SHEEHAN, MARGARET M

2425 NW 13TH STREET

CAPE CORAL, FL 33993

Name:

Address:

City-St-Zip: