

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000083230

Entity Name: SPF SERVICES, INC.

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

879 CINDY DRIVE  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

879 CINDY DRIVE  
WELLINGTON, FL 33414

**New Mailing Address:**

FEI Number: 20-1233134

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FISHER, JIM  
879 CINDY DRIVE  
WELLINGTON, FL 33414 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  
Name: FISHER, JIM  
Address: 4461 NW 9 STREET  
City-St-Zip: COCONUT CREEK, FL 33066

Title: D  
Name: MCKEE, CHERYL  
Address: 4461 NW 9TH STREET  
City-St-Zip: COCONUT CREEK, FL 33066

I hereby 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 all other like empowered.

SIGNATURE: JIM FISHER

D

04/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date