

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000092936

FILED  
Jan 15, 2009  
Secretary of State

Entity Name: SOS FACILITY SERVICES, INC.

## Current Principal Place of Business:

1142 JARDIN DRIVE  
NAPLES, FL 34104 US

## New Principal Place of Business:

501 GOODLETT ROAD NORTH  
BLDG D-100 SUITE D-12  
NAPLES, FL 34102 US

## Current Mailing Address:

1142 JARDIN DRIVE  
NAPLES, FL 34104 US

## New Mailing Address:

FEI Number: 34-2000063      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TAX , ACCOUNTING & FINANCIAL ASSOCIATES  
809 WALKERBUILT ROAD  
SUITE #5  
NAPLES, FL 34110 US

## Name and Address of New Registered Agent:

STARR, ERIC S  
1142 JARDEN DRIVE  
NAPLES, FL 34104 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: ERIC S. STARR

01/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: STARR, ERIC  
Address: 1142 JARDIN DRIVE  
City-St-Zip: NAPLES, FL 34104 US

Title: DVP ( ) Delete  
Name: DAVIS, STEVE W  
Address: 7216 SHORT ROAD  
City-St-Zip: PLANT CITY, FL 33565

Title: ST ( ) Delete  
Name: STARR, KAROLYN  
Address: 1142 JARDIN DRIVE  
City-St-Zip: NAPLES, FL 34104 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ERIC STARR

PRES

01/15/2009

Electronic Signature of Signing Officer or Director

Date