

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000098504

FILED
May 01, 2011
Secretary of State

Entity Name: ALL CONTRACTOR SERVICES, INC.

Current Principal Place of Business:

1742 SE LORRANIE ST.
PORT ST. LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 13852
FT. PIERCE, FL 34979

New Mailing Address:

FEI Number: 42-1636985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIFRANCESCO, JAMIE L P
1742 SE LORRAINE ST.
PORT ST. LUCIE, FL 34952 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: DIFRANCESCO, JAMIE
Address: 1742 SE LORRANIE
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: P
Name: DIFRANCESCO, JAMIE
Address: 1742 SE LORRAINE
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: VP
Name: DIFRANCESCO, JAMIE
Address: 1742 SE LORRAINE
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: S
Name: EDENFIELD, CHRISTINA L
Address: 1742 SE LORRAINE ST.
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: T
Name: EDENFIELD, CHRISTINA
Address: 1742 SE LORRAINE ST
City-St-Zip: PORT ST. LUCIE, FL 34952

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: JAMIE DIFRANCESCO

P

05/01/2011

Electronic Signature of Signing Officer or Director

Date