## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000119314

Entity Name: FALCON BUSINESS SERVICES, INC.

FILED Apr 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1302 NEBRASKA AVE. 705 SO. 23RD ST. 14C FT. PIERCE, FL 34950

FT. PIERCE, FL 34950

Current Mailing Address: New Mailing Address:

 1302 NEBRASKA AVE.
 705 SO. 23RD ST.

 14C
 FT. PIERCE, FL 34950

FT. PIERCE, FL 34950

FEI Number: 20-1504867 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FALLON, JUDITH I
1302 NEBRASKA AVE.
14C

FALLON, JUDITH I
705 SO. 23RD ST.
FT. PIERCE, FL 34950 US

FT. PIERCE, FL 34950 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: 04/16/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 FALLON, WARREN C
 Name:
 FALLON, JUDITH I

 Address:
 2505 CITRUS AVENUE
 Address:
 705 SO. 23RD ST.

 City-St-Zip:
 FT. PIERCE, FL 34947
 City-St-Zip:
 FT. PIERCE, FL 34950

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition Name: FALLON, JUDITH I Name: FALLON, JUDITH I

 Name:
 FALLON, JUDITH I
 Name:
 FALLON, JUDITH I

 Address:
 1302 NEBRASKA AVE. 14C
 Address:
 705 SO. 23RD ST.

 City-St-Zip:
 FT. PIERCE, FL 34950
 City-St-Zip:
 FT. PIERCE, FL 34950

Title: T, S ( ) Delete Title: T, S (X) Change ( ) Addition

 Name:
 FALLON, JUDITH I
 Name:
 FALLON, JUDITH I

 Address:
 1302 NEBRASKA AVE. 14C
 Address:
 705 SO. 23RD ST.

 City-St-Zip:
 FT. PIERCE, FL 34950
 City-St-Zip:
 FT. PIERCE, FL 34950

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: JUDITH I. FALLON P,VP 04/16/2009