

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000157460

Entity Name: EBENEZER/VINCENT, INC.

FILED
Apr 08, 2009
Secretary of State

Current Principal Place of Business:

3354 WESTCOTT DR
PALM HARBOR, FL 34684

New Principal Place of Business:

2633 GRAND LAKE SIDE DR
PALM HARBOR, FL 34684

Current Mailing Address:

3354 WESTCOTT DR
PALM HARBOR, FL 34684

New Mailing Address:

2633 GRAND LAKE SIDE DR
PALM HARBOR, FL 34684

FEI Number: 04-3304244

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOSEPH, JUSTIN G
1266 S PINELLAS AVE
TARPON SPRINGS, FL 34689 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: AZAR, VINCENT
Address: 3354 WESTCOTT DR
City-St-Zip: PALM HARBOR, FL 34684

Title: T () Delete
Name: AZAR, VINCENT
Address: 3354 WESTCOTT DR
City-St-Zip: PALM HARBOR, FL 34684

Title: VP () Delete
Name: SIMELINE, VINCENT
Address: 3354 WESTCOTT DR
City-St-Zip: PALM HARBOR, FL 34684

Title: S () Delete
Name: SIMELINE, VINCENT
Address: 3354 WESTCOTT DR
City-St-Zip: PALM HARBOR, FL 34684

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: AZAR, VINCENT
Address: 2633 GRAND LAKE SIDE DR
City-St-Zip: PALM HARBOR, FL 34684

Title: T (X) Change () Addition
Name: AZAR, VINCENT
Address: 2633 GRAND LAKE SIDE DR
City-St-Zip: PALM HARBOR, FL 34684

Title: VP (X) Change () Addition
Name: SIMELINE, VINCENT
Address: 2633 GRAND LAKE SIDE DR
City-St-Zip: PALM HARBOR, FL 34684

Title: S (X) Change () Addition
Name: SIMELINE, VINCENT
Address: 2633 GRAND LAKE SIDE DR
City-St-Zip: PALM HARBOR, FL 34684

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: AZAR J VINCENT

P

04/08/2009

Electronic Signature of Signing Officer or Director

Date