## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000173278

Entity Name: ACCURATE RESEARCH & RETRIEVAL, INC.

FILED Feb 04, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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17 MADEORE ST 1835 US HWY 1 SOUTH

ST AUGUSTINE, FL 32084 #119-317 ST AUGUSTINE, FL 32084

Current Mailing Address: New Mailing Address:

17 MADEORE ST 1835 US HWY 1 SOUTH

ST AUGUSTINE, FL 32084 #119-317

ST AUGUSTINE, FL 32084

FEI Number: 11-3737689 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:

PRICE, DIANE M
17 MADEORE ST
PRICE, DIANE M
1835 US HWY 1 SOUTH

ST AUGUSTINE, FL 32084 US #119-317 ST AUGUSTINE, FL 32084 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: DIANE PRICE 02/04/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete Title: PRES (X) Change ( ) Addition

 Name:
 PRICE, DIANE M
 Name:
 PRICE, DIANE M

 Address:
 17 MADEORE ST
 Address:
 1835 US HWY 1 SOUTH #119-317

City-St-Zip: ST AUGUSTINE, FL 32084 City-St-Zip: ST AUGUSTINE, FL 32084

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 LESLIE, HANCOCK
 Name:

 Address:
 5104 LINDEN
 Address:

 City-St-Zip:
 CHEYENNE, WY 82009
 City-St-Zip:

Title: TREA ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WANLESS, SANDRA
 Name:

 Address:
 800 LINEWOOD
 Address:

 City-St-Zip:
 DELTA, OH 43515
 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: DIANE M. PRICE PRES 02/04/2009