

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000066471

FILED
Apr 04, 2009
Secretary of State

Entity Name: O.D. 'S FLOOR SERVICES INC.

Current Principal Place of Business:

1745A SW KANNER HIGHWAY
STUART, FL 34997 US

New Principal Place of Business:

Current Mailing Address:

1745A SW KANNER HIGHWAY
STUART, FL 34997 US

New Mailing Address:

FEI Number: 20-2822284

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILEY, ORVILLE
10331 142ND STREET
MCALPIN, FL 32062 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: WILEY, ORVILLE
Address: 10331 142ND STREET
City-St-Zip: MCALPIN, FL 32062 US

Title: VP () Delete
Name: WILEY, LAWRENCE
Address: 6395 SE THOMAS DR
City-St-Zip: STUART, FL 34997

Title: S () Delete
Name: PHILLIPS, CHRISTOPHER
Address: 1219 SW COVERED BRIDGE RD
City-St-Zip: PALM CITY, FL 34990

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: ORVILLE WILEY

P

04/04/2009

Electronic Signature of Signing Officer or Director

_____ Date