2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000113307

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GULF BREEZE, FL 32562

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City-St-Zip:

Title:

Name:

Address:

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FILED Oct 20, 2008 Secretary of State

Entity Name: M & J SERVICES OF GULF BREEZE, INC **Current Principal Place of Business: New Principal Place of Business:** 421 MONTROSE BLVD. GULF BREEZE, FL 32561 US **Current Mailing Address: New Mailing Address:** PO BOX 1444 GULF BREEZE, FL 32562 US FEI Number: 20-3309369 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: HICKEY, RAYMOND G 913 GULF BREEZE PKWY SUITE #5 GULF BREEZE, FL 32561 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SEGARS, BRYAN M Name: Name: P.O. BOX 1444 Address: Address: City-St-Zip: GULF BREEZE, FL 32562 City-St-Zip: Title: Title: () Change () Addition () Delete Name: SEGARS, JENNIFER R Name: P.O. BOX 1444 Address: Address:

City-St-Zip:

Title:

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: BRYAN M SEGARS D 10/20/2008

() Change (X) Addition

WALLIS, KEVIN M

GULF BREEZE, FL 32562

P.O. BOX 1444