## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Aug 06, 2007 8:00 am Secretary of State DOCUMENT # P05000120984 08-06-2007 90033 040 \*\*\*150.00 GREG'S PROFESSIONAL SERVICES, INC. Principal Place of Business Mailing Address AULGOULA 17 CHERRYWOOD COURT 17 CHERRYWOOD COURT SOUTH DAYTONA, FL 32119 SOUTH DAYTONA, FL 32119 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 2030 Oriole Lane *a*030 Oriole Lane 07132007 Chg-P CR2E034 (12/06) 4. FEI Number Applied For 20-3406080 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TENNANT, GREGORY A SR. Street Address (P.O. Box Number is Not Acceptable) 17 CHERRYWOOD COURT SOUTH DAYTONA, FL 32119 zip.C. 32 119 avTona 8. 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. the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title If applicable 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution Added to Fees corporation did not receive the prior notice. Due by September 14, 2007 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 THILE Delete mur Change Addition NAME TENNANT, GREGORY A SR. MAME 2030 Oriole Lane 17 CHERRYWOOD COURT STRUCT ADDRESS STREET ADDRESS SOUTH DAYTONA, FL 32119 CITY - ST - ZiP South Daytona, FL 32119 CITY-S1-ZIP VΡ TUTLE Delete TITLE. Addition TENNANT, GREGORY A JR. NAME: MAME 2030 Oriole Lane STREET ADDRESS 17 CHERRYWOOD COURT STREET ADDRESS SOUTH DAYTONA, FL 32119 CITY-ST-2iP South DayTona, FL 3219 City-St-7/P Delete HILL ☐ Change ☐ Addition SITIE NAME NAME STRULT ADDRESS STREET AUDRESS CITY-ST-ZIP 0117 - \$1 - ZIP ☐ Delete TITLE ☐ Change - Addition NAME MAME STREET ADDRESS STREET AUDRESS CDY-SI-ZP OHY-ST-78 ☐ Delete TITLE Channe ☐ Addition me MAME STREET ADDRESS STRUCT ADDRESS City-ST-ZIP CHY-ST-ZE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STRUET ADDRESS CHY-ST-ZIE CHY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if charged, or on an attachment with an address, with all other like empowered

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