

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000123417

Entity Name: XTREME PROPERTY SERVICES INC

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

819 SE 9TH CT  
OKEECHOBEE, FL 34974

## New Principal Place of Business:

## Current Mailing Address:

819 SE 9TH CT  
OKEECHOBEE, FL 34974

## New Mailing Address:

FEI Number: 20-3535071

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHOCKLEY, DANIELLE D  
819 SE 9TH CT  
OKEECHOBEE, FL 34974 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: SHOCKLEY, MICHAEL N  
Address: 819 SE 9TH CT  
City-St-Zip: OKEECHOBEE, FL 34974

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SHOCKLEY, MICHAEL N  
Address: 819 SE 9TH CT  
City-St-Zip: OKEECHOBEE, FL 34974 US

Title: VP ( ) Change (X) Addition  
Name: SHOCKLEY, DANIELLE D  
Address: 819 SE 9TH CT  
City-St-Zip: OKEECHOBEE, FL 34974 US

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: DANIELLE SHOCKLEY

VP

04/30/2009

Electronic Signature of Signing Officer or Director

Date