

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000126367

FILED
Aug 16, 2009
Secretary of State

Entity Name: S & P SERVICES OF NW FLORIDA, INC

Current Principal Place of Business:

2855 KECK RD
MOLINO, FL 32577

New Principal Place of Business:

Current Mailing Address:

2855 KECK RD
MOLINO, FL 32577

New Mailing Address:

FEI Number: 20-3453397

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HICKEY, RAYMOND G
913 GULF BREEZE PARKWAY
SUITE 5
GULF BREEZE, FL 32561 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DILLASHAW, DEWAINE
Address: 2855 KECK RD
City-St-Zip: MOLINO, FL 32577

Title: D () Delete
Name: DENSMAN, RONALD
Address: 2855 KECK ROAD
City-St-Zip: MOLINO, FL 32577

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: DEWAINE DILLASHAW

PRES

08/16/2009

Electronic Signature of Signing Officer or Director

_____ Date