

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000161758

FILED  
Apr 11, 2008  
Secretary of State

Entity Name: COMPLETE COMPLIANCE SERVICES, INC.

## Current Principal Place of Business:

6531 SE FEDERAL HWY  
STUART, FL 34997

## New Principal Place of Business:

8260 SW CATTLEYA DRIVE  
STUART, FL 34997

## Current Mailing Address:

PO BOX 1027  
JUPITER, FL 33468

## New Mailing Address:

FEI Number: 20-3959914

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARCHIBALD, TYLER D  
6531 SE FEDERAL HWY  
STUART, FL 34997 US

## Name and Address of New Registered Agent:

ARCHIBALD, TYLER D  
8260 SW CATTLEYA DRIVE  
STUART, FL 34997 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: \_\_\_\_\_

04/11/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ARCHIBALD, TYLER D  
Address: 6531 SE FEDERAL HWY  
City-St-Zip: STUART, FL 34997

Title: VP ( ) Delete  
Name: STEELE, CRYSTAL L  
Address: 6531 SE FEDERAL HWY  
City-St-Zip: STUART, FL 34997

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ARCHIBALD, TYLER D  
Address: PO BOX 1027  
City-St-Zip: JUPITER, FL 33468

Title: VP (X) Change ( ) Addition  
Name: STEELE, CRYSTAL L  
Address: PO BOX 1027  
City-St-Zip: JUPITER, FL 33468

Title: S ( ) Change (X) Addition  
Name: ARCHIBALD, TYLER D  
Address: PO BOX 1027  
City-St-Zip: JUPITER, FL 33468

Title: T ( ) Change (X) Addition  
Name: ARCHIBALD, TYLER D  
Address: PO BOX 1027  
City-St-Zip: JUPITER, FL 33468

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: TYLER D ARCHIBALD

P

04/11/2008

Electronic Signature of Signing Officer or Director

Date