2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# P06000008640

Entity Name: ALL WICKED OUT, INC.

Current Principal Place of Business:

7749 NORMANDY BLVD
121
JACKSONVILLE, FL 32221

New Principal Place of Business:

Current Mailing Address:

7749 NORMANDY BOULEVARD #121
JACKSONVILLE, FL 32221

New Mailing Address:

FEI Number: 20-4123091 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STRICKLAND, DARLENE C
7749 NORMANDY BOULEVARD #121
JACKSONVILLE, FL, FL 32221 US

Name and Address of New Registered Agent:

STRICKLAND, DARLENE C
7749 NORMANDY BOULEVARD #121
JACKSONVILLE, FL 32221 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: DARLENE C STRICKLAND 04/24/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: STRICKLAND, DARLENE
Address: 1283 CATHY TRIPP LANE
City-St-Zip: JACKSONVILLE, FL 32221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: DARLENE STRICKLAND PRES 04/24/2009
Electronic Signature of Signing Officer or Director Date