

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000024313

FILED
Apr 08, 2008
Secretary of State

Entity Name: MCLEOD MAINTENANCE SERVICE INC

Current Principal Place of Business:

1704 SW 19TH PLACE
CAPE CORAL, FL 33991

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 101621
CAPE CORAL, FL 33910 US

New Mailing Address:

FEI Number: 20-4481568

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCLEOD, LOMBARDO
1704 SW 19TH PLACE
CAPE CORAL, FL 33991 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: MCLEOD, LOMBARDO
Address: P.O. BOX 101621
City-St-Zip: CAPE CORAL, FL 33910 US

Title: VPST () Delete
Name: MCLEOD, LOURDES P
Address: P.O. BOX 101621
City-St-Zip: CAPE CORAL, FL 33910 US

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: LOMBARDO MCLEOD

P

04/08/2008

Electronic Signature of Signing Officer or Director

Date