

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000030323

FILED
Sep 21, 2009
Secretary of State

Entity Name: DC SERVICES OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business:

96399 NASSAU LAKES CIRCLE
FERNANDINA BEACH, FL 32034 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 15635
FERNANDINA BEACH, FL 32035 US

New Mailing Address:

FEI Number: 65-1268592

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRICKLAND, JOSEPH M
96399 NASSAU LAKES CIRCLE
FERNANDINA BCH, FL 32034 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

OFFICERS AND DIRECTORS:

Title: PDTS () Delete
Name: STRICKLAND, JOSEPH M
Address: 96399 NASSAU LAKES CIRCLE
City-St-Zip: FERNANDINA BCH, FL 32034

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: RINECK, MICHAEL D
Address: 96075 CORAL REEF ROAD
City-St-Zip: YULEE, FL 32097

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: JOSEPH STRICKLAND

PDTS

09/21/2009

Electronic Signature of Signing Officer or Director

Date