2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000036180

Entity Name: ALK SERVICES, INC.

FILED Mar 05, 2009 Secretary of State

Current Principa 307 NE 36TH AV 1 OCALA, FL 3447 Current Mailing 307 NE 36TH AV 1 OCALA, FL 3447 FEI Number: 83-046	/E 70 US I Address /E 70 US		New Mailing Ad	Place of Business: ddress:
1 OCALA, FL 3447 Current Mailing 307 NE 36TH AV 1 OCALA, FL 3447 FEI Number: 83-046	70 US Address /E 70 US	:	New Mailing Ad	ddress:
Current Mailing 307 NE 36TH AV 1 OCALA, FL 3447 FEI Number: 83-046	, Address /E 70 US	:	New Mailing Ad	ddress:
307 NE 36TH AV 1 OCALA, FL 3447 FEI Number: 83-046	/E 70 US	:	New Mailing Ad	ddress:
1 OCALA, FL 3447 FEI Number: 83-046	70 US			
FEI Number: 83-046				
	66218			
Name and Addr		FEI Number Applied For ()	FEI Number Not Applicable	() Certificate of Status Desired ()
Name and Addre	ess of Cu	rrent Registered Agent:	Name and Add	ress of New Registered Agent:
STEWART, SUZ 307 NE 36TH AV				
OCALA, FL 3447	70 US			
in the State of Flo		isinits this statement for the p	ourpose of changing its reg	gistered office or registered agent, or both,
SIGNATURE:	Electronic	Signature of Registered Age	ent ent	 Date
		Trust Fund Contribution ().		Date
OFFICERS AND	DIRECT	ORS:	ADDITIONS/CH	HANGES TO OFFICERS AND DIRECTOR
Address: 307 N	() [VART, JIMM VE 36TH AV _A, FL 344]	≣ #1	Title: Name: Address: City-St-Zip:	() Change () Addition
Address: 307 N	() [RD, LYNDA NE 36TH AV _A, FL 344]	≣ #1	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:]()	Delete	Address: 434	() Change (X) Addition ZER, ROSS JEROME AVE JILLE, OH 44667 US

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: LYNDA KINARD VP\D 03/05/2009