

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000050844

FILED
Apr 15, 2007
Secretary of State

Entity Name: A-1 CONTRACT SERVICES INC.

Current Principal Place of Business:

4700 BABCOCK ST., N.E.
STE. 19-191
PALM BAY, FL 32905

New Principal Place of Business:

410 DISTRIBUTION DRIVE
PMB118
MELBOURNE, FL 32904

Current Mailing Address:

12488 E. IRLO BRONSON MEM HWY
SAINT CLOUD, FL 34773

New Mailing Address:

FEI Number: 20-4659527 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YEARY, LORILEE
12490 E. IRLO BRONSON MEM HWY
SAINT CLOUD, FL FL 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: YEARY, CALVIN F JR
Address: 12490 E. IRLO BRONSON HWY
City-St-Zip: SAINT CLOUD, FL 34773

Title: D () Delete
Name: JOHNSON, JAMES C
Address: 12478 E. IRLO BRONSON HWY
City-St-Zip: SAINT CLOUD, FL 34773

Title: P (X) Delete
Name: YEARY, LORILEE
Address: 12490 E. IRLO BRONSON MEM HWY
City-St-Zip: SAINT CLOUD, FL 34773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: YEARY, LORILEE
Address: 12490 E. IRLO BRONSON MEM HWY
City-St-Zip: SAINT CLOUD, FL 34773

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CALVIN F. YEARY JR.

P

04/15/2007

Electronic Signature of Signing Officer or Director

_____ Date