

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000069243

FILED
Apr 25, 2008
Secretary of State

Entity Name: EXECUTIVE TRANSPORTATION SPECIALISTS, INC.

Current Principal Place of Business:

12331 TOWNE LAKE DRIVE
1
FORT MYERS, FL 33913 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 61332
FORT MYERS, FL 33906

New Mailing Address:

FEI Number: 14-1965294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELLINGTON, AMY A
8911 DANIELS PARKWAY
6
FORT MYERS, FL 33912 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: WELLINGTON, AMY A
Address: 4366 TUFTS AVENUE
City-St-Zip: FORT MYERS, FL 33901 US

Title: VP () Delete
Name: IANNONE, DAVID A
Address: 12051 GATEWAY GREENS DR UNIT 323
City-St-Zip: FT MYERS, FL 33913

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WELLINGTON, AMY A
Address: 8911 DANIELS PKWY #6
City-St-Zip: FORT MYERS, FL 33912 US

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: AMY A. WELLINGTON

P

04/25/2008

Electronic Signature of Signing Officer or Director

Date