## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

## Apr 02, 2008 8:00 am Secretary of State 04-02-2008 90040 043 \*\*\*150.00 DOCUMENT # P06000134657 1. Entity Name ABOVE & BEYOND HOUSEKEEPING, INC. Principal Place of Business Mailing Address CORRECTED FEIN 13552 OTWAY RD 13552 OTWAY RD JACKSONVILLE, FL 32246 JACKSONVILLE, FL 32246 03072008 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-5791514 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent STANLEY, BARBARA J DO NOT WRITE 13552 OTWAY RD JACKSONVILLE, FL 32246 IN THIS SPACE 8. The above named entity submits this statement fog the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of egistered agent. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS **PSD** THILE STANLEY, BARBARA J NAME STREET ADDRESS 13552 OTWAY RD CITY-ST-ZIP JACKSONVILLE, FL 32246 VPTD MILNER, AMANDA NAME STREET ADDRESS 13552 OTWAY RD CITY-ST-ZIP JACKSONVILLE, FL 32246 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADORESS CITY-\$1-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**FILED**