2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# P07000023213

Entity Name: GREAT VALUE ACCOUNTING & TAXES, INC

Current Principal Place of Business:

1875 CASSINGHAM CIRCLE
OCOEE, FL 34761 US

New Principal Place of Business:

2840 PYTHAGORAS CIRCLE
OCOEE, FL 34761 US

Current Mailing Address:

P.O. BOX 681922
ORLANDO, FL 32868 US

New Mailing Address:

FEI Number: 20-8496912 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUPISELL, DOUGLAS R
939 NE 125 ST.
N. MIAMI, FL 33161 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: ST JEAN, JOAM D
Address: 1875 CASSINGHAM CIRCLE
City-St-Zip: OCOEE, FL 34761 US

Title: S ( ) Delete
Name: ST JEAN, RUTH
Address: 1875 CASSINGHAM CIRCLE
City-St-Zip: OCOEE, FL 34761 US

Title: VP ( ) Delete
Name: ST JEAN, WILFRID
Address: 8451 5TH AVENUE
City-St-Zip: MIAMI, FL 33150 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ST JEAN, JOAM D
Address: 2840 PYTHAGORAS CIRCLE
City-St-Zip: OCOEE, FL 34761 US

Title: S (X) Change ( ) Addition
Name: ST JEAN, RUTH
Address: 2840 PYTHAGORAS CIRCLE
City-St-Zip: OCOEE, FL 34761 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: ST JEAN JOAM D. P 04/15/2009

Electronic Signature of Signing Officer or Director — Date