

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000050160

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: XXTRAORDINARY SERVICES, INC.

## Current Principal Place of Business:

8815 CONROY-WINDERMERE ROAD  
# 186  
ORLANDO, FL 32835

## New Principal Place of Business:

## Current Mailing Address:

8815 CONROY-WINDERMERE ROAD  
# 186  
ORLANDO, FL 32835

## New Mailing Address:

FEI Number: 20-8928620

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOSHING, GWENNETT R  
2668 #2 SILVER HILLS DR  
ORLANDO, FL 32818 US

## Name and Address of New Registered Agent:

HOSHING, GWENNETT R  
8815 CONROY-WINDERMERE ROAD  
# 186  
ORLANDO, FL 32835 US

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:

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: HOSHING, GWENNETT R  
Address: 2668 #2 SILVER HILLS DRIVE  
City-St-Zip: ORLANDO, FL 32818

Title: DT ( ) Delete  
Name: HOSHING, WYCLIFFE S III  
Address: 2668 #2 SILVER HILLS DRIVE  
City-St-Zip: ORLANDO, FL 32818

Title: DT ( ) Delete  
Name: TRACY ANN MUIR-NELSON  
Address: 7360 MARDELL COURT,  
City-St-Zip: ORLANDO, FL 32835 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: HOSHING, GWENNETT R  
Address: 8815 CONROY-WINDERMERE ROAD, #186  
City-St-Zip: ORLANDO, FL 32835

Title: DT (X) Change ( ) Addition  
Name: HOSHING, WYCLIFFE S III  
Address: 8815 CONROY-WINDERMERE ROAD, #186  
City-St-Zip: ORLANDO, FL 32835

Title: D (X) Change ( ) Addition  
Name: MUIR-NELSON, TRACY ANN N  
Address: 7360 MARDELL COURT,  
City-St-Zip: ORLANDO, FL 32835 US

Title: D ( ) Change (X) Addition  
Name: DONALDSON, NELLIE A  
Address: 26 DIAMOND STREET  
City-St-Zip: ELMONT, NY 11003

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: NELLIE DONALDSON

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date