## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000069309

Entity Name: R & R TECHNICAL SERVICES, INC.

FILED Jan 03, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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30375 QUAIL ROOST TRAIL UNIT U
30375 QUAIL ROOST TRAIL
BIG PINE KEY, FL 33043
UNIT U

BIG PINE KEY, FL 33043

Current Mailing Address: New Mailing Address:

175 FREEDOM LN.

BIG PINE KEY, FL 33043

30375 QUAIL ROOST TRAIL
UNIT U
BIG PINE KEY, FL 33043

FEI Number: 26-0350508 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATE CREATIONS NETWORK, INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: DPS (X) Change ( ) Addition Name: CHRISTENSON-WALLEN, DONA L Name: CHRISTENSON, RICHARD M

 Name:
 CHRISTENSON-WALLEN, DONA L
 Name:
 CHRISTENSON, RICHARD I

 Address:
 175 FREEDOM LN.
 Address:
 175 FREEDOM LN.

City-St-Zip: BIG PINE KEY, FL 33043 City-St-Zip: BIG PINE KEY, FL 33043

Title: D (X) Delete Title: ( ) Change ( ) Addition
Name: MASON RUSTIN R Name:

 Name:
 MASON, RUSTIN R
 Name:

 Address:
 175 FREEDOM LN.
 Address:

 City-St-Zip:
 BIG PINE KEY, FL 33043
 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: RICHARD M. CHRISTENSON PRES 01/03/2008