

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000070586

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Entity Name:** SUPERIOR CONCIERGE SERVICE INC.

**Current Principal Place of Business:**

217 DOE DR  
DAVENPORT, FL 33837

**New Principal Place of Business:**

**Current Mailing Address:**

217 DOE DR  
DAVENPORT, FL 33837

**New Mailing Address:**

**FEI Number:** 26-0454526

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JIMERSON, KATHLEEN  
217 DOE DR  
DAVENPORT, FL 33837 US

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

BUCHHARDT, TAMMY  
217 DOE DR  
DAVENPORT, FL 33837 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:** TAMMY BUCHHARDT

03/16/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** JIMERSON, KATHLEEN  
**Address:** 217 DOE DR  
**City-St-Zip:** DAVENPORT, FL 33837

**Title:** VP  
**Name:** BUCHHARDT, TAMMY  
**Address:** 217 DOE DRIVE  
**City-St-Zip:** DAVENPORT, FL 33837

**Title:** VP  
**Name:** HASSETT, VANESSA  
**Address:** 10340 NORTH GLEN DR.  
**City-St-Zip:** CLERMONT, FL 34711

I hereby 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 all other like empowered.

**SIGNATURE:** TAMMY BUCHHARDT

VP

03/16/2011

Electronic Signature of Signing Officer or Director

Date