

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000074367

FILED
Aug 20, 2008
Secretary of State

Entity Name: SULLIVAN INVESTMENT SERVICES, INC

Current Principal Place of Business:

13555 AUTOMOBILE BLVD SUITE 200
CLEARWATER, FL 33762

New Principal Place of Business:

Current Mailing Address:

PO BOX 17491
CLEARWATER, FL

New Mailing Address:

PO BOX 17491
CLEARWATER, FL 33762

FEI Number: 51-0640984

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SULLIVAN, JOHN
14810 RUE DE BAYONNE #7-B
CLEARWATER, FL 33762 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SULLIVAN, JOHN
Address: 14810 RUE DE BAYONNE #7-B
City-St-Zip: CLEARWATER, FL 33762

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V () Change (X) Addition
Name: SULLIVAN, KATHERINE
Address: 14810 RUE DE BAYONNE #7-B
City-St-Zip: CLEARWATER, FL 33762

Title: DIR () Change (X) Addition
Name: MANNY, BRUCE
Address: 6802 W. HILLSBOROUGH AVE #5
City-St-Zip: TAMPA, FL 33624

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: KATHERINE SULLIVAN

VP

08/20/2008

Electronic Signature of Signing Officer or Director

Date