

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000080302

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** RESIDENTIAL SERVICES/FLOYD CHASON, INC.

**Current Principal Place of Business:**

445 AIRPORT RD  
WAUCHULA, FL 33873

**New Principal Place of Business:**

**Current Mailing Address:**

445 AIRPORT RD  
WAUCHULA, FL 33873

**New Mailing Address:**

**FEI Number:** 26-0477522

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHASON, FLOYD  
445 AIRPORT RD  
WAUCHULA, FL 33873 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  
Name: CHASON, FLOYD  
Address: 445 AIRPORT RD  
City-St-Zip: WAUCHULA, FL 33873

Title: VP  
Name: CHASON, JOHN M  
Address: 445 AIRPORT RD  
City-St-Zip: WAUCHULA, FL 33873

Title: S  
Name: HINES, STEPHEN K  
Address: 397 AIRPORT RD  
City-St-Zip: WAUCHULA, FL 33873

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:** FLOYD CHASON

PRES

04/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date