

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000112029

FILED
Apr 30, 2008
Secretary of State

Entity Name: ALL PROFESSIONAL PROCESS INC.

Current Principal Place of Business:

12318 ADVENTURE DR.
RIVERVIEW, FL 33569

New Principal Place of Business:

11517 VILLAGE BROOK DR.
RIVERVIEW, FL 33579

Current Mailing Address:

P.O. BOX
3517
RIVERVIEW, FL 33568

New Mailing Address:

FEI Number: 26-1580747 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRADFORD, COREY T
12318 ADVENTURE DR.
RIVERVIEW, FL 33569 US

Name and Address of New Registered Agent:

BRADFORD, COREY T
11517 VILLAGE BROOK DR.
RIVERVIEW, FL 33579 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: _____

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BRADFORD, COREY T
Address: P.O BOX 3517
City-St-Zip: RIVERVIEW, FL 33568

Title: VP () Delete
Name: KRENN, ERIN M
Address: P.O BOX 3517
City-St-Zip: RIVERVIEW, FL 33568

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: () Change () Addition
Name:
Address:
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: COREY BRADFORD

PRES

04/30/2008

Electronic Signature of Signing Officer or Director

Date