

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000122361

FILED
Aug 27, 2008
Secretary of State**Entity Name:** REAL ESTATE RECOVERY SERVICES, INC.**Current Principal Place of Business:**2451 CUMBERLAND PKWYSE #300
ATLANTA, GA 30339 US**New Principal Place of Business:****Current Mailing Address:**PO BOX 510908
KEY COLONY BEACH, FL 33051 US**New Mailing Address:****FEI Number:** 26-2120852**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: TIMOTHY, WALTERS PRES
Address: P.O. BOX 510908
City-St-Zip: KEY COLONY BEACH, FL 33051 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: JOANN, COOK-KUIPERS PRES
Address: P.O. BOX 500021
City-St-Zip: MARATHON, FL 33050 US

Title: SEC () Change (X) Addition
Name: JOANN, COOK-KUIPERS SEC
Address: P.O. BOX 500021
City-St-Zip: MARATHON, FL 33051

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: JOANN COOK-KUIPERS

PRES

08/27/2008

Electronic Signature of Signing Officer or Director

Date