

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000023451

FILED  
Jul 30, 2009  
Secretary of State

Entity Name: AFFORDABLE INNOVATIVE SERVICES, INC.

## Current Principal Place of Business:

1137 NORTH STREET  
DAYTONA BEACH, FL 32114

## New Principal Place of Business:

## Current Mailing Address:

1137 NORTH STREET  
DAYTONA BEACH, FL 32114

## New Mailing Address:

FEI Number: 32-0241597      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THOMAS, EMORY JR  
1137 NORTH STREET  
DAYTONA BEACH, FL 32114      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: THOMAS, EMORY JR  
Address: 1137 NORTH STREET  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: S ( ) Delete  
Name: HUDSON, JACKYE P  
Address: 4640 - 58TH AVE.  
City-St-Zip: VERO BEACH, FL 32967

Title: T ( ) Delete  
Name: THOMAS, SHYKEEM  
Address: 1137 NORTH STREET  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D ( ) Delete  
Name: RAINGE, DONOFA  
Address: 1137 NORTH STREET  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: THOM ( ) Delete  
Name: AS, PATRICIA  
Address: 1137 NORTH STREET  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D ( ) Delete  
Name: THOMAS, KATINA  
Address: 1137 NORTH STREET  
City-St-Zip: DAYTONA BEACH, FL 32114

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: EMORY THOMAS, JR.

P

07/30/2009

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

\_\_\_\_\_  
Date