2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2009
Secretary of State

DOCUMENT# P08000033669

Entity Name: ALL POINTS LIMOUSINE, INC.

Current Principal Place of Business:

11180 1ST STREET EAST
SUITE- 2
TREASURE ISLAND, FL 33706

New Principal Place of Business:

7000 BURLINGTON AVE N
SUITE 202
ST. PETERSUBUR, FL 33710

Current Mailing Address:

11180 1ST STREET EAST
SUITE- 2
TREASURE ISLAND, FL 33706

New Mailing Address:

P.O. BOX 9463
TREASURE ISLAND, FL 33740

FEI Number: 26-2312312 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, BILL S
11180 1ST STREET EAST
SUITE -2
TREASURE ISLAND, FL FL US

Name and Address of New Registered Agent:

SMITH, SID
7000 BURINGTON AVE N
SUITE 202
ST PETERSBURG, FL FL 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: SID SMITH 03/10/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SMITH, BILL S
Address: 11180 1ST STREET EAST SUITE-2
City-St-Zip: TREASURE ISLAND, FL 33706

Title: VP ( ) Delete
Name: ANDERSON, VICKIE J
Address: 11180 1ST STREET EAST SUITE-2
City-St-Zip: TREASURE ISLAND, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SMITH, SID
Address: P.O BOX 9564
City-St-Zip: TREASURE ISLAND, FL 33740

Title: VP (X) Change ( ) Addition
Name: NOBLES, VICKIE J
Address: P.O. BOX 9463
City-St-Zip: TREASURE ISLAND, FL 33740

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: VICKIE NOBLES VP 03/10/2009
Electronic Signature of Signing Officer or Director Date