

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000050026

FILED
Mar 25, 2009
Secretary of State

Entity Name: S.O.S. PROPERTY SPECIALISTS, INC.

Current Principal Place of Business:

6709 RIDGE RD, STE 113
PORT RICHEY, FL 34668

New Principal Place of Business:

25935 CRIPPEN DRIVE
LAND O LAKES, FL 34639

Current Mailing Address:

6709 RIDGE RD, STE 113
PORT RICHEY, FL 34668

New Mailing Address:

25935 CRIPPEN DRIVE
LAND O LAKES, FL 34639

FEI Number: 22-3979554

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

BILLINGS, KAREN
2019 TEMPLE TERRACE
CLEARWATER, FL 33764 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: KAREN BILLINGS

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: STEEN, KELLY L
Address: 15310 AMBERLY DRIVE SUITE 250
City-St-Zip: TAMPA, FL 33647

Title: T () Delete
Name: STEEN, BRETT R
Address: 15310 AMBERLY DRIVE SUITE 250
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: STEEN, BRETT R
Address: 25935 CRIPPEN DRIVE
City-St-Zip: LAND O LAKES, FL 34639

Title: VP (X) Change () Addition
Name: STEEN, KELLY L
Address: 25935 CRIPPEN DRIVE
City-St-Zip: LAND O LAKES, FL 34639

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: BRETT R STEEN

PSD

03/25/2009

Electronic Signature of Signing Officer or Director

Date