

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000061229

Entity Name: BYA SERVICES, INC.

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

25227 NE EVANS STREET  
ALTHA, FL 32421

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 553  
ALTHA, FL 32421

**New Mailing Address:**

FEI Number: 26-2901824

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

POWELL, STEPHANIE M  
25227 NE EVANS STREET  
ALTHA, FL 32421 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: POWELL, BENJAMIN K  
Address: 25227 NE EVANS STREET  
City-St-Zip: ALTHA, FL 32421

Title: VP  
Name: POWELL, STEPHANIE M  
Address: 25227 NE EVANS STREET  
City-St-Zip: ALTHA, FL 32421

I hereby 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 all other like empowered.

SIGNATURE: STEPHANIE MILLS POWELL

VP

02/18/2010

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

\_\_\_\_\_  
Date