## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000061857

Entity Name: NATIONAL CERTIFIED SERVICES, INC.

**FILED** May 19, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

445 STATE ROAD 13 N STE #26 302 445 STATE ROAD 13 N STE #26 302

SAINT JOHNS, FL 325593864 SAINT JOHNS, FL 32259

**Current Mailing Address: New Mailing Address:** 

445 STATE ROAD 13 N STE #26 302 445 STATE ROAD 13 N STE #26 302

SAINT JOHNS, FL 325593864 SAINT JOHNS, FL 32259

FEI Number: 26-2912289 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WEBB, MATTHEW WEBB, MATTHEW 119 ARGONAUT ROAD 445 STATE ROAD 13 N STE #26 302

SAINT JOHNS, FL 322593864 US SAINT JOHNS, FL 32259

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: MATTHEW WEBB 05/19/2009

> 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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

WEBB, MATTHEW C WEBB, MATTHEW C Name: Name:

119 ARGONAUT ROAD 445 STATE ROAD 13 N STE #26 302 Address: Address:

City-St-Zip: ST. AUGUSTINE, FL 320865701 City-St-Zip: SAINT JOHNS, FL 32259

( ) Delete Title: Title: (X) Change ( ) Addition

WEBB. VERONICA N Name: Name: WEBB. VERONICA N

119 ARGONAUT ROAD 445 STATE ROAD 13 N STE #26 302 Address: Address:

ST. AUGUSTINE, FL 328065701 SAINT JOHNS, FL 32259 City-St-Zip: 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: MATTHEW WEBB **PRES** 05/19/2009