

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000067167

FILED
Apr 29, 2009
Secretary of State

Entity Name: ANOTHER MAN'S TREASURES OF PSL, INC.

Current Principal Place of Business:

7701 WHITE EGRET LANE
PORT ST LUCIE, FL 34952 US

New Principal Place of Business:

8751 SOUTH FEDERAL HWAY
PORT ST LUCIE, FL 34952 US

Current Mailing Address:

7701 WHITE EGRET LANE
PORT ST LUCIE, FL 34952 US

New Mailing Address:

8751 SOUTH FEDERAL HWAY
PORT ST LUCIE, FL 34952 US

FEI Number: 26-2988660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALBERT, LEO
7701 WHITE EGRET LANE
PORT ST LUCIE, FL 34952 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: PD () Delete
Name: SHEPARD, FRANCES L
Address: 2848 EAGLES NEST WAY
City-St-Zip: PORT ST LUCIE, FL 34952 US

Title: SD () Delete
Name: ALBERT, SUSAN
Address: 7701 WHITE EGRET LANE
City-St-Zip: PORT ST LUCIE, FL 34952 US

Title: TD (X) Delete
Name: ALBERT, LEO
Address: 7701 WHITE EGRET LANE
City-St-Zip: PORT ST LUCIE, FL 34952 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALBERT, SUSAN
Address: 7701 WHITE EGRET LANE
City-St-Zip: PORT ST LUCIE, FL 34952 US

Title: TD (X) Change () Addition
Name: ALBERT, LEO
Address: 7701 WHITE EGRET LANE
City-St-Zip: PORT ST LUCIE, FL 34952 US

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: LEO ALBERT

TD

04/29/2009

Electronic Signature of Signing Officer or Director

Date