

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000067393

FILED  
Mar 26, 2009  
Secretary of State

Entity Name: AMERIWILLCAN HOME SOLUTIONS, INC.

## Current Principal Place of Business:

1149 HAMILTON ST  
JACKSONVILLE, FL 32205

## New Principal Place of Business:

2251 MONTEAU DR  
JACKSONVILLE, FL 32210

## Current Mailing Address:

1149 HAMILTON ST  
JACKSONVILLE, FL 32205

## New Mailing Address:

2251 MONTEAU DR  
JACKSONVILLE, FL 32210

FEI Number: 80-0220021

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILKINSON, HOUSTON  
1149 HAMILTON ST  
JACKSONVILLE, FL 32205 US

## Name and Address of New Registered Agent:

WILKINSON, WILLIAM H  
2251 MONTEAU DR  
JACKSONVILLE, FL 32210 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: WILLIAM H WILKINSON

03/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WILKINSON, HOUSTON  
Address: 1149 HAMILTON ST  
City-St-Zip: JACKSONVILLE, FL 32205

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: WILKINSON, WILLIAM H  
Address: 2251 MONTEAU DR  
City-St-Zip: JACKSONVILLE, FL 32210

Title: VP ( ) Change (X) Addition  
Name: WILKINSON, JEREMY L  
Address: 2251 MONTEAU DR  
City-St-Zip: JACKSONVILLE, FL 32210

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: WILLIAM H WILKINSON

PD

03/26/2009

Electronic Signature of Signing Officer or Director

Date