

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000067990

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

**Entity Name:** BUSINESS & TAX SERVICES BY LIZETTE INC

**Current Principal Place of Business:**

6845 SOUTH FORK RANCH DRIVE  
CLERMONT, FL 347148420

**New Principal Place of Business:**

6845 SOUTH FORK RANCH DRIVE  
CLERMONT, FL 34714 US

**Current Mailing Address:**

6845 SOUTH FORK RANCH DRIVE  
CLERMONT, FL 347148420

**New Mailing Address:**

6845 SOUTH FORK RANCH DRIVE  
CLERMONT, FL 34714 US

**FEI Number:** 27-0757199

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

INCorp SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 US

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

JACKSON, VIOLA S  
6845 S FORK RANCH DR  
CLERMONT, FL 34714 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: VIOLA S JACKSON

03/18/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: BRINK, LIZETTE M  
Address: 6845 SOUTH FORK RANCH DRIVE  
City-St-Zip: CLERMONT, FL 34714 US

Title: VD  
Name: BRINK, JEFFREY A  
Address: 6845 SOUTH FORK RANCH DRIVE  
City-St-Zip: CLERMONT, FL 34714 US

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: LIZETTE M BRINK

PSTD

03/18/2010

Electronic Signature of Signing Officer or Director

Date