

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000094731

FILED
Mar 22, 2012
Secretary of State

Entity Name: ABSOLUTE RECOVERY SPECIALIST, INC.

Current Principal Place of Business:

102 N MAIN STREET
B
BUNNELL, FL 32110

New Principal Place of Business:

Current Mailing Address:

P O BOX 217
BUNNELL, FL 32110

New Mailing Address:

PO BOX 217
BUNNELL, FL 32110

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAURA, GALLIEN L
102 B N. MAIN ST
BUNNELL, FL 32110 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

OFFICERS AND DIRECTORS:

Title: P
Name: RAIMONDO, JOSEPH A
Address: P O BOX 217
City-St-Zip: BUNNELL, FL 32110

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: JOSEPH A. RAIMONDO

PRES

03/22/2012

Electronic Signature of Signing Officer or Director

Date