2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P29458

FILED Feb 13, 2008 Secretary of State

Entity Name: PARTRIDGE-SIBLEY INDUSTRIAL SERVICES, INC. **Current Principal Place of Business: New Principal Place of Business:** 2076 HWY 49 S 4273 I 55 N SUITE 1B JACKSON, MS 39073 JACKSON, MS 39206 **Current Mailing Address: New Mailing Address:** 2076 HWY 49 S 4273 I-55N SUITE 1B FLORENCE, MS 39073 US JACKSON, MS 39206 FEI Number: 64-0707312 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: FLEMING, FLETCHER FLOOR SEVILLE TOWER 226 SOUTH PALAFOX PENSACOLA, FL 325981831 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition PARTRIDGE, D. RICHARD PARTRIDGE, D. RICHARD Name: Name: 1245 TECMSEH CT. 4273 I55 N SUITE 1B Address: Address: PENSACOLA, FL City-St-Zip: City-St-Zip: JACKSON, MS 39206 Title: Title: SD (X) Change () Addition () Delete Name: KELSO, DELORES. Name: KELSO, DELORES. 2076 HWY 495 4273 I 55 N SUITE 1B Address:

Address: FLORENCE, MS City-St-Zip:

Title: () Delete PARTRIDGE, CHARLES H Name:

2076 HWY 49 S Address: City-St-Zip: FLORENCE, MS Title: (X) Change () Addition Name: PARTRIDGE, CHARLES H 4273 I 55 N SUSITE 1B Address: City-St-Zip: JACKSON, MS 39206

JACKSON, MS 39206

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.

Ρ SIGNATURE: D RICHARD PARTRIDGE 02/13/2008