## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P92000012138

Entity Name: SERVICE OF THE SOUTH - OVIEDO, INC

FILED Feb 06, 2006 Secretary of State

	er oznar	CE OF THE GOOTH OVIEDO	, 1140.			
Current P	rincipal Pla	nce of Business:	New Princ	New Principal Place of Business:		
160 E. BR OVIEDO, I		US				
Current N	lailing Add	ress:	New Maili	New Mailing Address:		
PO BOX 6 OVIEDO, I		US				
FEI Number	: 59-3161149	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and	l Address o	f Current Registered Agent:	Name and	Address of	f New Registered Agent:	
WEBSTEF 160 E BRO OVIEDO, I		TTE A US				
	named enti e of Florida.	ty submits this statement for the	e purpose of changing i	its registered	d office or registered agent, or both,	
SIGNATUI	RE:					
	Elect	ronic Signature of Registered A	gent		Date	
Election Ca	mpaign Finan	cing Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:		( ) Delete CHARLOTTE A PING TURTLE RD 2754	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VD WEBSTER, 1300 SNAPI MIMS, FL 3	PING TURTLE RD	Title: Name: Address: City-St-Zip:	VP WEBSTER, I 304 CELERY OVIEDO, FL	Y CIRCLE	
Title: Name: Address: City-St-Zip:	T WEBSTER, 304 CELER OVIEDO, FL	Y CIR	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S WEBSTER, 304 CELER OVIEDO, FL	Y CIR	Title: Name: Address: City-St-Zip:	S/T WEBSTER, S 304 CELERY OVIEDO, FL	Y CIR	

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLOTTE WEBSTER PSTD 02/06/2006