

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000002737

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: EXPRESS-LEE YOURS SERVICES, INC.

## Current Principal Place of Business:

2109 ILLINOIS AVE.  
ENGLEWOOD, FL 34224

## New Principal Place of Business:

6392 DAVID BLVD.  
PORT CHARLOTTE, FL 33981

## Current Mailing Address:

2109 ILLINOIS AVE.  
ENGLEWOOD, FL 34224

## New Mailing Address:

6392 DAVID BLVD.  
PORT CHARLOTTE, FL 33981

FEI Number: 65-0392506

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GUNDERSON, MIKO P  
% BATSEL MCKINLEY ITTERSAGEN & GUNDERSON  
1861 PLACIDA RD., SUITE 104  
ENGLEWOOD, FL 34223 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: WORCH, PATRICIA M  
Address: 2109 ILLINOIS AVE.  
City-St-Zip: ENGLEWOOD, FL 34224

Title: D ( ) Delete  
Name: GRANGER, ALFRED L  
Address: 2109 ILLINOIS AVE.  
City-St-Zip: ENGLEWOOD, FL 34224

Title: D ( ) Delete  
Name: DOMINEY, MYRON  
Address: 6392 DAVID BLVD  
City-St-Zip: PORTE CHARLOTTE, FL 33982

Title: VS ( ) Delete  
Name: DOMINEY, CHRISTINA E  
Address: 6392 DAVID BLVD  
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: D (X) Delete  
Name: CHAMPION, TERRI L  
Address: 19916 MIDWAY BLVD  
City-St-Zip: PORT CHARLOTTE, FL 33948

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition  
Name: MILLER, SERENA N  
Address: 9404 CRESCENT LOOP CIR #101  
City-St-Zip: TAMPA, FL 33619

Title: D (X) Change ( ) Addition  
Name: CHAMPION, TERRI L  
Address: 19916 MIDWAY BLVD  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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.

SIGNATURE: MYRON G DOMINEY

D

04/17/2009

Electronic Signature of Signing Officer or Director

Date