

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000046409

Entity Name: S & S BOBCAT SERVICES, INC.

FILED
Mar 07, 2005
Secretary of State

Current Principal Place of Business:

443 AZALEA AVE SE
PALM BAY, FL 32909

New Principal Place of Business:

Current Mailing Address:

443 AZALEA AVE SE
PALM BAY, FL 32909

New Mailing Address:

FEI Number: 59-3191280

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, SCOTT
443 AZALEA AVE SE
PALM BAY, FL 32909 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: DP () Delete
Name: ANDERSON, SCOTT
Address: 443 AZALEA AVE SE
City-St-Zip: PALM BAY, FL 32909

Title: DTS () Delete
Name: ANDERSON, SHERYL
Address: 443 AZALEA AVE SE
City-St-Zip: PALM BAY, FL 32909

Title: VP (X) Delete
Name: BAIRD, CASEY J MR
Address: 443 AZALEA AVE., SE
City-St-Zip: PALM BAY, FL 32909

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: ANDERSON, SCOTT
Address: 443 AZALEA AVE SE
City-St-Zip: PALM BAY, FL 32909

Title: DVP (X) Change () Addition
Name: LLOYD, SUTTON
Address: PO BOX 121281
City-St-Zip: W. MELBOURNE, FL 32912

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SCOTT ANDERSON

DP

03/07/2005

Electronic Signature of Signing Officer or Director

Date