2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000073917

Entity Name: OVERLAND SERVICES, INC.

FILED Feb 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2811 N 62ND ST. 4773 E STAGECOACH TRAIL TAMPA, FL 33619 FLORAL CITY, FL 34436

Current Mailing Address: New Mailing Address:

2811 N 62ND ST. P.O. BOX 7236

TAMPA, FL 33619 US PORT ST LUCIE, FL 34985 US

FEI Number: 65-0533097 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:

MEROLA, SALVATORE MEROLA, SALVATORE R
2811 N 62ND ST. 4773 E STAGECOACH TRAIL
TAMPA, FL 33619 US FLORAL CITY, FL 34436 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: SALVATORE R. MEROLA 02/17/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 MEROLA, ELSA V
 Name:
 MEROLA, ELSA V

 Address:
 2811 N 62ND ST.
 Address:
 4773 E STAGECOACH TRAIL

 City-St-Zip:
 TAMPA, FL 33619
 City-St-Zip:
 FLORAL CITY, FL 34436

Title: D () Delete Title: D (X) Change () Addition
Name: MEROLA SALVATORE
Name: MEROLA SALVATORE

 Name:
 MEROLA, SALVATORE
 Name:
 MEROLA, SALVATORE

 Address:
 2811 N 62ND ST.
 Address:
 4773 E STAGECOACH TRAIL

 City-St-Zip:
 TAMPA, FL 33619
 City-St-Zip:
 FLORAL CITY, FL 34436

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: SALVATORE R. MEROLA V.P. 02/17/2009