2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000031262

City-St-Zip:

FILED Mar 07, 2008 Secretary of State

Entity Name: SOUTHEAST SHARPENING SERVICE & SUPPLY, INC.						
Current Pri	incipal Place	of Business:	New Princ	New Principal Place of Business:		
3626 NW 9 GAINESVIL	7TH BLVD. LE, FL 32606					
Current Ma	ailing Address	:	New Maili	New Mailing Address:		
3626 NW 97TH BLVD. GAINESVILLE, FL 32606						
FEI Number:	59-3311347	FEI Number Applied For ()	El Number Not Appl	cable () Certif	icate of Status Desired()	
Name and	Address of Cu	ırrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
TAYLOR, ALAN 3626 NW 97TH BLVD. GAINESVILLE, FL 32606 US			3626 NW 9	CLAPP, BEVERLY B 3626 NW 97TH BLVD. GAINESVILLE, FL 32606 US		
The above in the State		ubmits this statement for the purpo	ose of changing it	s registered office o	r registered agent, or both,	
SIGNATURE: BEVERLY CLAPP				03/07/2008		
	Electronic	Signature of Registered Agent		Date		
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PVT () I TAYLOR, ALAN 3626 NW 97TH E GAINESVILLE, F		Title: Name: Address: City-St-Zip:	P (X) Chang CLAPP, BEVERLY B 3123 NW 27TH AVENU GAINESVILLE, FL 326		
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	VP () Chang BOOKER, MATTHEW A 3123 NW 27TH AVENU GAINESVILLE, FL 326	JE	
Title: Name: Address:	1()	Delete	Title: Name: Address:	T () Chang CLAPP III, WILLIAM L 3123 NW 27TH AVENU	e (X) Addition JE	

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.

City-St-Zip:

GAINESVILLE, FL 32605

SIGNATURE: BEVERLY CLAPP P 03/07/2008