

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000086169

FILED
Apr 17, 2009
Secretary of State

Entity Name: BUG OUT SERVICE OF WEST FLORIDA, INC.

Current Principal Place of Business:

7201 NORTH 9TH AVENUE
SUITE A-2
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

7201 NORTH 9TH AVENUE
SUITE A-2
PENSACOLA, FL 32504

New Mailing Address:

P.O. BOX 11307
SUITE A/2
PENSACOLA, FL 32524

FEI Number: 59-3346597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SESSIONS, JOHN F.
5951 ARLINGTON EXPRESSWAY
SUITE 3000
JACKSONVILLE, FL 32211 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: PD () Delete
Name: SESSIONS, JOHN
Address: 5951 ARLINGTON EXPRESSWAY
City-St-Zip: JACKSONVILLE, FL 32211

Title: VPD () Delete
Name: TATE, EDWARD D
Address: 4607 LABORDE LANE
City-St-Zip: PENSACOLA, FL 32514

Title: ST () Delete
Name: JANES, ROBERT S
Address: 5951 ARLINGTON EXPRESSWAY
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: EDWARD D. TATE

VP

04/17/2009

Electronic Signature of Signing Officer or Director

Date