

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000029693

Entity Name: ACCESS LIMITED, INC.

FILED
Apr 24, 2009
Secretary of State

Current Principal Place of Business:

8505 BAYCENTER RD
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

8505 BAYCENTER RD
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 59-3482556

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUCKNER, DARIN
6332 AUTUMN BERRY CIRCLE
JACKSONVILLE, FL 32258 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: BUCKNER, DARIN
Address: 6332 AUTUMN BERRY CIR
City-St-Zip: JACKSONVILLE, FL 32258

Title: DV () Delete
Name: WALTHER, CHARLES R
Address: 8104 FRESCA STREET
City-St-Zip: JACKSONVILLE, FL 32217

Title: SD () Delete
Name: BUCKNER, CHRISTINA
Address: 6332 AUTUMN BERRY CIRCLE
City-St-Zip: JACKSONVILLE, FL 32258

Title: DT () Delete
Name: ARNOLD, ROB
Address: 545 JEFFERSON DR #108
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCEO (X) Change () Addition
Name: BUCKNER, DARIN
Address: 6332 AUTUMN BERRY CIR
City-St-Zip: JACKSONVILLE, FL 32258

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

Title: DCOO (X) Change () Addition
Name: POURGOLAFSHAN, FARSHID
Address: 1872 REAR ADMIRAL DRIVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: DS (X) Change () Addition
Name: ARNOLD, ROB
Address: 545 JEFFERSON DR #108
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: DT () Change (X) Addition
Name: FERGUSON, ANTHONY D
Address: 430 DRIGGERS ROAD
City-St-Zip: BROOKLET, GA 30415

Title: D () Change (X) Addition
Name: BRUCE, TERRY
Address: 692 CAMP JOHNSON ROAD
City-St-Zip: ORANGE PARK, FL 32065

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: CHARLES R. WALTHER

DV

04/24/2009

Electronic Signature of Signing Officer or Director

Date