

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000062304

FILED  
Jan 07, 2010  
Secretary of State

**Entity Name:** COVERING FORCE SALES, INC.

**Current Principal Place of Business:**

250 LAKE LINK DRIVE S.E.  
WINTER HAVEN, FL 33884

**New Principal Place of Business:**

**Current Mailing Address:**

250 LAKE LINK DRIVE S.E.  
WINTER HAVEN, FL 33884

**New Mailing Address:**

**FEI Number:** 59-3525943

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WALKER, JOHN J III  
250 LAKE LINK DRIVE S.E.  
WINTER HAVEN, FL 33884 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:** D  
**Name:** WALKER, JOHN J III  
**Address:** 250 LAKE LINK DRIVE S.E.  
**City-St-Zip:** WINTER HAVEN, FL 33884

**Title:** D  
**Name:** WALKER, SUSAN M  
**Address:** 250 LAKE LINK DRIVE S.E.  
**City-St-Zip:** WINTER HAVEN, FL 33884

I hereby 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 all other like empowered.

**SIGNATURE:** SUSAN M. WALKER

VP

01/07/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date