## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000103696

City-St-Zip:

TALLAHASSEE, FL 32311

FILED May 13, 2009 Secretary of State

Entity Name: BUDGET NOTARY SERVICES, INC.					
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
	LACHEE PKW SSEE, FL 323				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P.O. BOX (	5797 SSEE, FL 323	14			
FEI Number:	59-3556497	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
BERGER, KERRY E 4155 A BREWSTER RD TALLAHASSEE, FL 32308 US				ELLIOTT, TIM 2873 REMINGTON GREEN CIR TALLAHASSEE, FL 32308 US	
	named entity e of Florida.	submits this statement for the pu	rpose of changing its registered	office or registered agent, or both,	
SIGNATURE: TIM ELLIOTT				05/13/2009	
	Electro	nic Signature of Registered Ager	t	Date	
		03(2)(b), F.S., the corporation did not g Trust Fund Contribution ( ).	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( TAYLOR, DEB 8910 HAWICK TALLAHASSEE	LANE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	ST ( DIESTELHORS 2701 EVERET TALLAHASSEE	T ĹN	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	SOLOMON, DE	) Delete EBRA PLANTATION RD	Title: Name: Address:	( ) Change ( ) Addition	

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:

SIGNATURE: DEBRA TAYLOR Ρ 05/13/2009