2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2009
Secretary of State

DOCUMENT# P98000107610

Entity Name: LADY BUG SERVICES, INC.

Current Principal Place of Business:

6254 POWERS AVE
85
JACKSONVILLE, FL 32217

New Principal Place of Business:

6254 POWERS AVE
73
JACKSONVILLE, FL 32217

Current Mailing Address:

PO BOX 19971
JACKSONVILLE, FL 322459971

New Mailing Address:

FEI Number: 59-3547889 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MOSELEY STRATTON, PAT
371 CIRCLE DRIVE NORTH
ST AUGUSTINE, FL 32207 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: P ( ) Delete
Name: STRATTON, PATRICE M
Address: 371 CIRCLE DRIVE NORTH
City-St-Zip: ST AUGUSTINE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: STRATTON, PATRICE M
Address: 371 CIRCLE DRIVE NORTH
City-St-Zip: ST AUGUSTINE, FL 32207

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: PATRICE M. STRATTON PRES 02/22/2009

Electronic Signature of Signing Officer or Director — Date