

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2008 8:00 am
Secretary of State

04-18-2008 90025 030 ***150.00

DOCUMENT # S74057

1. Entity Name
COMPLETE BOOKKEEPING & TAX SERVICES, INC.



Principal Place of Business
**3307 NORTHLAKE BLVD
STE 107
PALM BCH GARDENS, FL 33410 US**

Mailing Address
**3307 NORTHLAKE BLVD
STE 107
PALM BCH GARDENS, FL 33410 US**

40071343



2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

04102008 Chg-P CR2E034 (12/06)

City & State
City & State

4. FEI Number
65-0279535

Applied For
Not Applicable

Zip
33403

Country

Zip
33403

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**LEWIS, WILLIAM F
3307 NORTHLAKE BLVD
STE 107
PALM BEACH GARDENS, FL 33410**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code
33403

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SWARNER, FREDERICK R		NAME		
STREET ADDRESS	3307 NORTHLAKE BLVD., STE 107		STREET ADDRESS		
CITY - ST - ZIP	PALM BEACH GARDENS, FL 33410		CITY - ST - ZIP	33403	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LEWIS, DOROTHY B		NAME		
STREET ADDRESS	3307 NORTHLAKE BLVD., STE 107		STREET ADDRESS		
CITY - ST - ZIP	PALM BEACH GARDENS, FL 33410		CITY - ST - ZIP	33403	
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LEWIS, WILLIAM F		NAME		
STREET ADDRESS	3307 NORTHLAKE BLVD., STE 107		STREET ADDRESS		
CITY - ST - ZIP	PALM BEACH GARDENS, FL 33410		CITY - ST - ZIP	33403	
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STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
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STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William F Lewis **WILLIAM F LEWIS**
PRESIDENT
Date: **4-14-08** Daytime Phone #: **561-626-2715**