

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V08778

FILED
Apr 30, 2009
Secretary of State

Entity Name: EXPRESS TAX OF AMERICA, INC.

Current Principal Place of Business:

739 MASON AVE
DAYTONA BEACH, FL 32117

New Principal Place of Business:

Current Mailing Address:

739 MASON AVE
DAYTONA BEACH, FL 32117

New Mailing Address:

FEI Number: 59-3109242

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENJAMIN, C H
4491 STATE RD 11
DELEON SPRINGS, FL 32120 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 () Delete
Name: BENJAMIN, DEBRA B
Address: 4491 STATE RD 11
City-St-Zip: DELEON SPRINGS, FL 32120

Title: DPT () Delete
Name: BENJAMIN, C H
Address: 4491 STATE RD 11
City-St-Zip: DELEON SPRINGS, FL 32120

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: BENJAMIN, DEBRA B
Address: 4491 STATE RD 11
City-St-Zip: DELEON SPRINGS, FL 32120

Title: DP (X) Change () Addition
Name: BENJAMIN, C H
Address: 4491 STATE RD 11
City-St-Zip: DELEON SPRINGS, FL 32120

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: DEBRA BENJAMIN

DT

04/30/2009

Electronic Signature of Signing Officer or Director

Date