2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2009
Secretary of State

DOCUMENT# V22479

Entity Name: A+ ACCOUNTING & BOOKKEEPING, INC.

Current Principal Place of Business:

1591 S LANE AVENUE
W-110
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

1591 S LANE AVENUE
31-S
JACKSONVILLE, FL 32210 US

Current Mailing Address:

P O BOX 6399
JACKSONVILLE, FL 322366399 US

New Mailing Address:

FEI Number: 59-3107382 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, FRANCIS P
1591 S LANE AVENUE
W-110
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

SMITH, FRANCIS P
1591 S LANE AVENUE
31-S
JACKSONVILLE, FL 32210 US

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: FRANCIS P. SMITH 04/20/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: SMITH, PATRICIA ANN
Address: 1591 S. LANE AVENUE S-31
City-St-Zip: JACKSONVILLE, FL 32210

Title: DVP ( ) Delete
Name: SMITH, FRANCIS P
Address: 1591 S LANE AVENUE S-31
City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) Delete
Name: WERTMAN, LEILA R
Address: 1591 S LANE AVENUE S-31
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: FRANCIS P. SMITH DVP 04/20/2009
Electronic Signature of Signing Officer or Director Date