

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006600

Entity Name: EARLY OUT SERVICES, INC.**Current Principal Place of Business:**5807 N. 102ND ST.
OMAHA, NE 68134**Current Mailing Address:**5807 N. 102ND ST.
OMAHA, NE 68134**FEI Number:** 47-0738489**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	CP
Name	HAWLEY, TED
Address	5807 N. 102ND ST.
City-State-Zip:	OMAHA NE 68134

Title	CEO
Name	LEAVITT, RUSSELL JAMES
Address	5807 N. 102ND ST.
City-State-Zip:	OMAHA NE 68134

Title	CHIEF COMPLIANCE OFFICER
Name	YAKEL, THERESE MARIE
Address	5807 N. 102ND ST.
City-State-Zip:	OMAHA NE 68134

Title	D
Name	YAKEL, PAUL JACOB
Address	5807 N. 102ND ST.
City-State-Zip:	OMAHA NE 68134

Title	D
Name	LEAVITT, SANDRA ANN
Address	5807 N. 102ND ST.
City-State-Zip:	OMAHA NE 68134

Title	D
Name	LEAVITT, ELSIE ANNE
Address	5807 N. 102ND ST.
City-State-Zip:	OMAHA NE 68134

I hereby 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 all other like empowered.

SIGNATURE: YAKEL, THERESE MARIE**CHIEF COMPLIANCE
OFFICER****02/07/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date