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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 837959 (6)

1. Corporation Name

PROTECTION SERVICES INC.



Principal Place of Business

635 LUCKNOW ROAD
HARRISBURG PA 17110

Mailing Address

635 LUCKNOW ROAD
HARRISBURG PA 17110

3. Date Incorporated or Qualified

03/04/1977

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-statuting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE AS ☐ DELETE

NAME MINORI, THOMAS M.
STREET ADDRESS 635 LUCKWOOD RD
CITY-ST-ZIP HARRISBURG PA

TITLE VD ☐ DELETE

NAME HOLTZINGER, LEWIS T
STREET ADDRESS 635 LUCKNOW RD
CITY-ST-ZIP HARRISBURG, PA 00000

TITLE PD ☐ DELETE

NAME DUNMIRE, C C JR
STREET ADDRESS 635 LUCKNOW RD
CITY-ST-ZIP HARRISBURG PA

TITLE T ☐ DELETE

NAME STABLER, DONALD B
STREET ADDRESS 635 LUCKNOW RD
CITY-ST-ZIP HARRISBURG PA

TITLE V ☐ DELETE

NAME FRANZ, RICHARD N
STREET ADDRESS 635 LUCKNOW RD
CITY-ST-ZIP HARRISBURG PA

TITLE S ☐ DELETE

NAME DANKO, DOUGLAS B
STREET ADDRESS 635 LUCKNOW RD
CITY-ST-ZIP HARRISBURG PA

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NOT SECT 4/22/96

Date:

Daytime Phone #

CR2E034 (12/95)