

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 719954

**FILED**  
**Feb 08, 2017**  
**Secretary of State**  
**CC0275021694**

**Entity Name:** PRIDE INTEGRATED SERVICES, INC.

**Current Principal Place of Business:**

1310 N. CONGRESS AVENUE  
SUITE #200  
WEST PALM BEACH, FL 33409

**Current Mailing Address:**

1310 N. CONGRESS AVENUE  
SUITE #200  
WEST PALM BEACH, FL 33409

**FEI Number:** 23-7098114

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

FERRILL, MAUREEN D  
1310 N. CONGRESS AVENUE  
SUITE #200  
WEST PALM BEACH, FL 33409 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:** MAUREEN D. FERRILL

02/08/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name SMITH, BOBBY "TONY"  
Address 1310 N. CONGRESS AVENUE  
SUITE #200  
City-State-Zip: WEST PALM BEACH FL 33409

Title STD  
Name BERMAN, TANI P  
Address 1310 N CONGRESS AVE, STE 200  
City-State-Zip: WEST PALM BEACH FL 33405

Title D  
Name HANSON, JILL  
Address 1310 N. CONGRESS AVE, STE #200  
City-State-Zip: WEST PALM BEACH FL 33409

Title CFO  
Name MOSS, DANA MSR  
Address 1310 N. CONGRESS AVENUE SUITE  
#200  
City-State-Zip: WEST PALM BEACH FL 33409

Title CEO  
Name FERRILL, MAUREEN  
Address 1310 N. CONGRESS AVENUE - SUITE  
200  
City-State-Zip: WEST PALM BEACH FL 33409

Title DIRECTOR  
Name HOLLANDER, SANDER  
Address 1310 N. CONGRESS AVENUE  
SUITE #200  
City-State-Zip: WEST PALM BEACH FL 33409

Title DIRECTOR  
Name GAUGER, MICHAEL  
Address 1310 N. CONGRESS AVENUE  
SUITE #200  
City-State-Zip: WEST PALM BEACH FL 33409

Title DIRECTOR  
Name MCCABE, PATRICK  
Address 1310 N. CONGRESS AVENUE  
SUITE #200  
City-State-Zip: WEST PALM BEACH FL 33409

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*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MAUREEN FERRILL

CEO

02/08/2017

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           MITCHELL, LEONARD B  
Address        1310 N. CONGRESS AVENUE  
                  SUITE #200  
City-State-Zip: WEST PALM BEACH FL 33409