

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000080430

**Entity Name:** VOGEL INVESTIGATIVE & PROTECTIVE SERVICES, INC.

**Current Principal Place of Business:**

VOGEL SECURITY INC  
2435 SWORDFISH LANE  
EDGEWATER, FL 32141

**Current Mailing Address:**

VOGEL SECURITY INC  
2435 SWORDFISH LANE  
EDGEWATER, FL 32141

**FEI Number:** 59-3673160

**Certificate of Status Desired:** No

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

VOGEL, ROBERT LJR  
2435 SWORDFISH LANE  
EDGEWATER, FL 32141 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 D  
Name VOGEL, ROBERT LJR.  
Address 2435 SWORDFISH LANE  
City-State-Zip: EDGEWATER FL 32141

Title D  
Name VOGEL, JEAN-MARTA M  
Address 2435 SWORDFISH LANE  
City-State-Zip: EDGEWATER FL 32141

Title D  
Name GETZELS, SHEILA J  
Address 2435 SWORDFISH LANE  
City-State-Zip: EDGEWATER FL 32141

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:** ROBERT VOGEL, JR.

**PRESIDENT**

**02/25/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date