#### 2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000000881

Entity Name: PROFESSIONALS INTERNATIONAL INCORPORATED

FILED
Mar 21, 2019
Secretary of State
8459176459CC

# **Current Principal Place of Business:**

2916 NW BUCKLIN HILL RD.

#388

SILVERDALE, WA 98383

## **Current Mailing Address:**

2916 NW BUCKLIN HILL RD.

#388

SILVERDALE, WA 98383 US

FEI Number: 20-2016266 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC 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 PRESIDENT Title SECRETARY

NameRUFO, MICHAEL TNameWAGNER, WARREN CAddress9548 OSPREY LANDING DRAddress24 BOBOLINK DRIVE

City-State-Zip: ORLANDO FL 32832 City-State-Zip: GETTYSBURG PA 17325

Title TREASURER Title DIRECTOR

Name FOWLER, JOHNNY Name BURNS, NATHAN

Address 232 PRAIRIE DUNEWAY Address 3465 VICTORIA PINES DR
City-State-Zip: ORLANDO FL 32828 City-State-Zip: ORLANDO FL 32829

Title DIRECTOR Title CHIEF BUSINESS OFFICER

Name CASSON, RACHEL Name UNGREN, KATHLEEN M.
Address 8 CROWN ST. Address 2916 NW BUCKLIN HILL RD.

#388

City-State-Zip: WEBSTER MA 01570 City-State-Zip: SILVERDALE WA 98383

Title EXECUTIVE DIRECTOR

Name BLUMER, MICHAEL

Address 3468 ALLEGRA CIRCLE
City-State-Zip: ST. CLOUD FL 34772

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: KATHLEEN M. UNGREN

CHIEF BUSINESS OFFICER 03/21/2019