2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0300005806

Entity Name: PUBLIC COMMUNICATIONS SERVICES, INC.

Current Principal Place of Business:

12021 SUNSET HILLS ROAD SUITE 100 RESTON, VA 20190

Current Mailing Address:

12021 SUNSET HILLS ROAD SUITE 100 RESTON, VA 20190

FEI Number: 95-4615444

Name and Address of Current Registered Agent:

INCORP SERVICES, INC. 17888 67TH CT NORTH LOXAHATCHEE, FL 33470 US Certificate of Status Desired: No

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

Officer/Director Detail :

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Title	PRESIDENT	Title	SECRETARY
Name	HAIDINGER, JEFFERY B	Name	RIDGEWAY, TERESA L
Address	12021 SUNSET HILLS ROAD SUITE 100	Address	2609 CAMERON STREET
City-State-Zip:		City-State-Zip:	MOBILE AL 36607
Title	TREASURER	Title	DIRECTOR
Name	YOW, STEVE	Name	OLIVER, BRIAN
Address	2609 CAMERON STREET	Address	12021 SUNSET HILLS ROAD SUITE 100
City-State-Zip:	MOBILE AL 36607	City-State-Zip:	RESTON VA 20190
Title	DIRECTOR	Title	DIRECTOR
Name	ROSSETTI, PAUL	Name	LEVINE, MATTHEW
Address	12021 SUNSET HILLS ROAD SUITE 100	Address	12021 SUNSET HILLS ROAD SUITE 100
City-State-Zip:	RESTON VA 20190	City-State-Zip:	RESTON VA 20190
Title	DIRECTOR	Title	DIRECTOR
Name	PENN, KEVIN	Name	LEVIN, BLAIR
Address	12021 SUNSET HILLS ROAD SUITE 100	Address	12021 SUNSET HILLS ROAD SUITE 100
City-State-Zip:		City-State-Zip:	RESTON VA 20190

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PRESIDENT

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: JEFFERY HAIDINGER

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	CALABRESE, WAYNE
Address	12021 SUNSET HILLS ROAD SUITE 100
City-State-Zip:	RESTON VA 20190