

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005806

Entity Name: PUBLIC COMMUNICATIONS SERVICES, INC.

FILED
Apr 12, 2016
Secretary of State
CC1249039348

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

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCorp SERVICES, INC.
17888 67TH CT NORTH
LOXAHATCHEE, FL 33470 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
Name HAIDINGER, JEFFERY B
Address 12021 SUNSET HILLS ROAD
 SUITE 100
City-State-Zip: RESTON VA 20190

Title SECRETARY, VP
Name RIDGEWAY, TERESA
Address 2609 CAMERON STREET
City-State-Zip: MOBILE AL 36607

Title TREASURER
Name YOW, STEVE
Address 2609 CAMERON STREET
City-State-Zip: MOBILE AL 36607

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

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

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

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

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

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

SIGNATURE: TERESA RIDGEWAY

SECRETARY

04/12/2016

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