2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 186766

Entity Name: OFFICE PRODUCTS AND SERVICES, INC.

FILED Jan 21, 2009 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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136 N 2ND ST

FT PIERCE, FL 349504403

Current Mailing Address: New Mailing Address:

136 N 2ND ST

FT PIERCE, FL 349504403

FEI Number: 59-0748072 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TILLMAN, ROBERT C
5211 S INDIAN RIVER DR
FT PIERCE,, FL 34982 US

TILLMAN, ROBERT C
5211 S INDIAN RIVER DR
FT PIERCE,, FL 34982 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: ROBERT C TILLMAN 01/21/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 TILLMAN, ROBERT C,
 Name:
 TILLMAN, ROBERT C

 Address:
 5211 S INDIAN RIVER DR
 Address:
 5211 S INDIAN RIVER DR

 City-St-Zip:
 FT PIERCE, FL
 34982

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 DICKSON, PAMELA T,
 Name:
 DICKSON, PAMELA T

 Address:
 4002 OLEANDER AVE.
 Address:
 4002 OLEANDER AVE.

 City-St-Zip:
 FT. PIERCE, FL
 City-St-Zip:
 FT. PIERCE, FL 34982

Title: V () Delete Title: V (X) Change () Addition

 Name:
 THOMAS, SUSAN L.,
 Name:
 THOMAS, SUSAN L

 Address:
 6425 RIVERLAND DR
 Address:
 6425 RIVERLAND DR

 City-St-Zip:
 FT PIERCE, FL
 00000,
 City-St-Zip:
 FT PIERCE, FL
 34982

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT C TILLMAN PD 01/21/2009