

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 304615

FILED  
Feb 21, 2011  
Secretary of State

**Entity Name:** DIRECTORS SERVICE INCORPORATED

**Current Principal Place of Business:**

3121-44TH AVE, N  
ST PETERSBURG, FL 33714 US

**New Principal Place of Business:**

3121 - 44TH AVE. N.  
ST PETERSBURG, FL 33714 US

**Current Mailing Address:**

3121-44TH AVE, N  
ST PETERSBURG, FL 33714 US

**New Mailing Address:**

3121 - 44TH AVE. N.  
ST PETERSBURG, FL 33714 US

**FEI Number:** 59-1155333

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHULER, TIMOTHY C  
9075 SEMINOLE BLVD  
SEMINOLE, FL 33772 US

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

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

**OFFICERS AND DIRECTORS:**

Title: DST  
Name: WILLIAMS, ROBIN L.  
Address: 3530 - 49TH ST. N.  
City-St-Zip: ST PETERSBURG, FL 33710

Title: DV  
Name: BRETT, TIMOTHY T  
Address: 4810 CENTRAL AVE  
City-St-Zip: ST PETERSBURG, FL 33711

Title: DP  
Name: BRETT, TERRENCE E  
Address: 4810 CENTRAL AVE  
City-St-Zip: ST PETERSBURG, FL 33711

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: TIMOTHY C. SCHULER

RA

02/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date