

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 439844

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: WITH COMMUNITY SERVICES, INC.

## Current Principal Place of Business:

1880 N. CONGRESS AVE.  
220  
BOYNTON BEACH, FL 33426 US

## New Principal Place of Business:

## Current Mailing Address:

1880 N. CONGRESS AVE.  
220  
BOYNTON BEACH, FL 33426 US

## New Mailing Address:

FEI Number: 59-1474270      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NAWALANY, MICHAEL W  
1880 N. CONGRESS AVE. #220  
BOYNTON BEACH, FL 33426 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: NORIEGA, STEVE  
Address: 87 THREE LAKES DRIVE  
City-St-Zip: SAN ANTONIO, TX 78248

Title: VP ( ) Delete  
Name: PONSON, TRAVIS  
Address: 16633 ANIETAM AVE  
City-St-Zip: BATON ROUGE, LA 70817

Title: S ( ) Delete  
Name: FREDDE, MARCUS  
Address: 4300 WINNTKA RD  
City-St-Zip: DENTON, TX 76208

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: STEVE NORIEGA

P

04/21/2009

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

\_\_\_\_\_  
Date