

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002718

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: PRO ACCESS SYSTEMS, INC.

## Current Principal Place of Business:

1785 ARMITAGE CT.  
ADDISON, IL 60101

## New Principal Place of Business:

## Current Mailing Address:

1020 AIRPARK DRIVE  
SUGAR GROVE, IL 605549585

## New Mailing Address:

FEI Number: 36-3782278

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PARRIN, DONALD  
1313 PLAYMOOR DRIVE  
PALM HARBOR, FL 34683 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: PCD ( ) Delete  
Name: PARRIN, DONALD R  
Address: 1313 PLAYMOOR DRIVE  
City-St-Zip: PALM HARBOR, FL 34683

Title: VD ( ) Delete  
Name: WROBLEWSKI, MICHAEL C  
Address: 419 CLARENDON COURT  
City-St-Zip: CLARENDON HILLS, IL 60514

Title: SD ( ) Delete  
Name: FAVILLE, ANDREW M  
Address: 625 N. FIRST STREET  
City-St-Zip: GENEVA, IL 60134

Title: VTD ( ) Delete  
Name: SCHLEPP, ERVIN E  
Address: N7977 SURFWOOD DRIVE  
City-St-Zip: ELKHORN, WI 53121

Title: D ( ) Delete  
Name: HEERDT, LESLIE R  
Address: 7 SOUTH 773 RHODES  
City-St-Zip: BIG ROCK, IL 60511

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition  
Name: WROBLEWSKI, MICHAEL C  
Address: 6238 EDGEBROOK LANE  
City-St-Zip: INDIAN HEAD PARK, IL 60525

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: DONALD PARRIN

PRES

03/23/2009

Electronic Signature of Signing Officer or Director

Date