

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002879

Entity Name: PLACEMENT SOURCE, INC.

FILED
Feb 10, 2007
Secretary of State

Current Principal Place of Business:

2323 STATE ROAD 84
SLOCUM 359
FORT LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

PMB 6740, PO BOX 2428
PENSACOLA, FL 32513

New Mailing Address:

FEI Number: 84-1582894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FULLER, MARK S
2323 STATE ROAD 84
SLOCUM 359
FORT LAUDERDALE, FL 33312 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: CPS () Delete
Name: FULLER, MARK S
Address: 2323 STATE ROAD 84
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: VCVP () Delete
Name: FULLER, SUSAN
Address: 2323 STATE ROAD 84
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: T () Delete
Name: FULLER, SUSAN E
Address: 2323 STATE ROAD 84
City-St-Zip: FORT LAUDERDALE, FL 33312

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 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: MARK S FULLER

CPS

02/10/2007

Electronic Signature of Signing Officer or Director

Date