

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003333

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: INVESTIGATION & PROTECTION AGENCY, INC.

## Current Principal Place of Business:

3494 S. HAMILTON RD.  
SUITE 203  
COLUMBUS, OH 43232

## New Principal Place of Business:

## Current Mailing Address:

3494 S. HAMILTON RD.  
SUITE 203  
COLUMBUS, OH 43232

## New Mailing Address:

FEI Number: 31-1796938      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DR., STE 4  
WESTON, FL 33331 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: PRES ( ) Delete  
Name: COLLISON, DONALD M  
Address: 2290 MAUREEN BLVD. S.  
City-St-Zip: OBETZ, OH 43207

Title: DIR ( ) Delete  
Name: MCJUNKIN, MATTHEW  
Address: 9555 BLIND PASS RD.  
City-St-Zip: ST. PETE BEACH, FL 33706

Title: SEC ( ) Delete  
Name: SMITH, TRINA  
Address: 1762 MARLBORO AVE.  
City-St-Zip: OBETZ, OH 43207

Title: VP ( ) Delete  
Name: STEWART, KIMBERLY  
Address: 4180 SYLVAN DR.  
City-St-Zip: DAYTON, OH 45417

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: COLLISON, DONALD M  
Address: 4211 2ND AVE. NE  
City-St-Zip: BRADENTON, FL 34208

Title: DIR (X) Change ( ) Addition  
Name: MCJUNKIN, MATTHEW M  
Address: 849 BAY POINT DR  
City-St-Zip: MADEIRA BEACH, FL 33708

Title: SEC (X) Change ( ) Addition  
Name: LAWSON, SHAWN A  
Address: 6977 TOMAHAWK TRL.  
City-St-Zip: REYNOLDSBURG, OH 43068

Title: VP (X) Change ( ) Addition  
Name: STEWART, KIMBERLY R  
Address: 4180 SYLVAN DR.  
City-St-Zip: DAYTON, OH 45417

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 M. COLLISON

PRES

04/22/2009

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

\_\_\_\_\_  
Date