2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000000158

Entity Name: PROTECTIVE ADMINISTRATIVE SERVICES, INC.

FILED Jan 03, 2007 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
		ACE PRTY DRIVE, SUITE 400 US				
Current Mailing Address:			New Mailir	New Mailing Address:		
		ACE PRTY DRIVE, SUITE 400 US				
FEI Number: 4	43-1724227	FEI Number Applied For ()	FEI Number Not Appli	icable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US						
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:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	GRIGGS, BRENT	FORTY DRIVE STE 400	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	SVP () E MCCLUNG, QUE 14755 N OUTER CHESTERFIELD,	NTIN FORTY STE 400	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VPSD () E HACKETT, RICHA 14755 N OUTER CHESTERFIELD,	FORTY STE 400	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	SVP () D MILLER, ALAN 14755 N OUTER CHESTERFIELD,	FORTY STE 400	Title: Name: Address: City-St-Zip:	SVP (X) Change () Addition KARCHUNAS, SCOTT 14755 N OUTER FORTY STE 400 CHESTERFIELD, MO 63017		
Title: Name: Address: City-St-Zip:	CARIOLANO, GR	FORTY DR, STE 400	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	DOWNAR, MARK	FORTY DR., STE 400	Title: Name: Address: City-St-Zip:	ASAT (X) Change () Addition DOWNAR, MARK S 14755 N. OUTER FORTY DR., STE 400 SAINT LOUIS, MO 630176050		

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 DOWNAR ASAT 01/03/2007