

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002754

FILED  
Jan 07, 2009  
Secretary of State

Entity Name: PROXY REPRESENTATION SERVICES, INC.

## Current Principal Place of Business:

5111 66TH ST. N.  
102  
ST. PETERSBURG, FL 33709 US

## New Principal Place of Business:

3085 19TH PLACE S.W.  
LARGO, FL 33774 US

## Current Mailing Address:

P.O. BOX 4310  
SEMINOLE, FL 33775 US

## New Mailing Address:

3085 19TH PLACE S.W.  
LARGO, FL 33774 US

FEI Number: 56-2457173

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALBERS, BRYAN L  
5111 66TH ST. N.,  
102  
ST. PETERSBURG, FL FL US

## Name and Address of New Registered Agent:

ALBERS, BRYAN L  
6400 46TH AVENUE NORTH  
54  
KENNETH CITY, FL 33709 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: BRYAN ALBERS

01/07/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WALLACE, BRUCE E  
Address: 3085 19TH PLACE SW  
City-St-Zip: LARGO, FL 33774 US

Title: VP ( ) Delete  
Name: ALBERS, BRYAN L  
Address: 5111 66TH ST. N., SUITE 102  
City-St-Zip: ST. PETERSBURG, FL 33709 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: ALBERS, BRYAN L  
Address: 6400 46TH AVENUE NORTH # 54  
City-St-Zip: KENNETH CITY, FL 33709 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRUCE WALLACE

P

01/07/2009

Electronic Signature of Signing Officer or Director

Date