

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P0000072866

1. Entity Name

COMMUNICATIONS SYSTEMS & SERVICES, INC.



Principal Place of Business

777 S FLAGLER DRIVE, 12TH FLOOR  
PHILLIPS POINT EAST TOWER  
WEST PALM BEACH, FL 33401

Mailing Address

777 S FLAGLER DRIVE, 12TH FLOOR  
PHILLIPS POINT EAST TOWER  
WEST PALM BEACH, FL 33401

**FILED**  
**Apr 18, 2007 08:00 AM**  
**Secretary of State**



03022007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
52-2265724

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

F & L CORP.  
ONE INDEPENDENT DRIVE  
SUITE 1300  
JACKSONVILLE, FL 32202

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PROSSER, JEFFREY
STREET ADDRESS	777 S FLAGLER DR, #1201E
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	S
NAME	JOSEPH, ELING
STREET ADDRESS	777 S FLAGLER DR, #1201E
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000713125  
04/26/07-80076-019 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/3/07