

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000034578

FILED  
May 23, 2011  
Secretary of State

**Entity Name:** FIRST SERVICE ADMINISTRATORS, INC.

**Current Principal Place of Business:**

3035 LAKELAND HILLS BOULEVARD  
LAKELAND, FL 338052225 US

**New Principal Place of Business:**

**Current Mailing Address:**

3035 LAKELAND HILLS BOULEVARD  
LAKELAND, FL 338052225 US

**New Mailing Address:**

**FEI Number:** 41-2035345

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RAPSON, CHANDLER  
3035 LAKELAND HILLS BOULEVARD  
LAKELAND, FL 338052225 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

**OFFICERS AND DIRECTORS:**

Title: CD  
Name: LEVY, ODED  
Address: 115 EAST 57TH STREET, SUITE 1107  
City-St-Zip: NEW YORK, NY 10022 US

Title: P  
Name: RAPSON, CHANDLER  
Address: 3035 LAKELAND HILLS BLVD  
City-St-Zip: LAKELAND, FL 33805 US

Title: T  
Name: WILKOSZ, DIANE  
Address: 3035 LAKELAND HILLS BOULEVARD  
City-St-Zip: LAKELAND, FL 338052225 US

Title: S  
Name: SULLIVAN, KATHLEEN  
Address: 3035 LAKELAND HILLS BOULEVARD  
City-St-Zip: LAKELAND, FL 338052225 US

I hereby 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 all other like empowered.

SIGNATURE: DIANE WILKOSZ

CFO

05/23/2011

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

\_\_\_\_\_  
Date