

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000068434

FILED
Apr 03, 2007
Secretary of State

Entity Name: PROFESSIONAL COMMUNITY SERVICES, INC.

Current Principal Place of Business:

2310 DELLA DR
NAPLES, FL 34117

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 110156
NAPLES, FL 34108

New Mailing Address:

FEI Number: 30-0113359

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, WILLIAM D
2310 DELTA DR
NAPLES, FL 34117 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: PD (X) Delete
Name: SPEECHLY, CLIFFORD
Address: 435 W FOREST DR
City-St-Zip: VERO BEACH, FL 32962

Title: VPD () Delete
Name: WHITE, WILLIAM D
Address: 2310 DELTA DR
City-St-Zip: NAPLES, FL 34117

Title: SD () Delete
Name: DESMOND-WHITE, CYNTHIA
Address: 2310 DELTA DR
City-St-Zip: NAPLES, FL 34117

Title: TD (X) Delete
Name: SPEECHLY, SHERRI
Address: 435 W FOREST DR
City-St-Zip: VERO BEACH, FL 32962

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: WDW

VPD

04/03/2007

Electronic Signature of Signing Officer or Director

Date