2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000059866

FILED Apr 29, 2009 Secretary of State

Entity Name: RELIABLE PROFESSIONAL SERVICES, INC. **Current Principal Place of Business: New Principal Place of Business:** 301 MARYLAND AVE ST. CLOUD, FL 34769 **Current Mailing Address: New Mailing Address:** 301 MARYLAND AVE ST. CLOUD, FL 34769 FEI Number: 56-2395192 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GOWER, ELIZABETH GOWER, ELIZABETH 301 MARYLAND AVENUE 425 TENNESSEE AVE. US ST. CLOUD, FL 34769 ST. CLOUD, FL 34769 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: ELIZABETH GOWER 04/29/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition GOWER, ELIZABETH Name: Name: 301 MARYLAND AVE. Address: Address: City-St-Zip: SAINT CLOUD, FL 34769 City-St-Zip: Title: Title: () Change () Addition () Delete Name: LANSEL, AMY Name: 826 HAVENWOOD DRIVE Address: Address: ORLANDO, FL 32828 City-St-Zip: City-St-Zip:

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

SIGNATURE: ELIZABETH GOWER 04/29/2009 D