

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000009222

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** W. R. PRODUCTION SERVICES, INC.

**Current Principal Place of Business:**

16111 S. MAGNOLIA AVE  
SUMMERFIELD, FL 34491

**New Principal Place of Business:**

16111 S. MAGNOLIA AVE  
SUMMERFIELD, FL 34491 US

**Current Mailing Address:**

16111 S. MAGNOLIA AVE  
SUMMERFIELD, FL 34491

**New Mailing Address:**

16111 S. MAGNOLIA AVE  
SUMMERFIELD, FL 34491 US

**FEI Number:** 20-0625353

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FUGATE, WAYNE R  
16111 S. MAGNOLIA AVE.  
SUMMERFIELD, FL 34491 US

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

FUGATE, WAYNE R  
8191 SE 135TH ST  
SUMMERFIELD, FL 34491 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:

02/17/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: FUGATE, WAYNE R  
Address: 8191 SE 135TH ST  
City-St-Zip: SUMMERFIELD, FL 34491 US

Title: VP  
Name: FUGATE, CYNTHIA C  
Address: 8191 SE 135TH ST  
City-St-Zip: SUMMERFIELD, FL 34491 US

Title: S  
Name: FUGATE, CYNTHIA C  
Address: 8191 SE 135TH ST  
City-St-Zip: SUMMERFIELD, FL 34491 US

Title: T  
Name: FUGATE, CYNTHIA C  
Address: 8191 SE 135TH ST  
City-St-Zip: SUMMERFIELD, FL 34491 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: CYNTHIA FUGATE

VP

02/17/2011

Electronic Signature of Signing Officer or Director

Date