

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000128523

Entity Name: PRO HANDLERS, INC.

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2430 VENICE AVE. N.  
LEHIGH ACRES, FL 33971 US

**New Principal Place of Business:**

2032 E. 12TH STREET  
LEHIGH ACRES, FL 33972 US

**Current Mailing Address:**

2430 VENICE AVE. N.  
LEHIGH ACRES, FL 33971 US

**New Mailing Address:**

2032 E. 12TH STREET  
LEHIGH ACRES, FL 33972 US

FEI Number: 20-3572199

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WIEBEL, DOUGLAS E CPA  
9420 BONITA BEACH ROAD  
SUITE 200  
BONITA SPRINGS, FL 34135 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: PTD  
Name: BROWN, DIANE  
Address: 2032 E. 12TH STREET  
City-St-Zip: LEHIGH ACRES, FL 33972 US

Title: VPD  
Name: BROWN, KENNETH  
Address: 2032 E. 12TH STREET  
City-St-Zip: LEHIGH ACRES, FL 33972 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 BROWN

PTD

04/29/2011

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

\_\_\_\_\_  
Date