

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000165187

FILED
Apr 16, 2009
Secretary of State

Entity Name: POWERS PROTECTION, INC.

Current Principal Place of Business:

4250 W. MALALUKA CIR.
CITRUS SPRINGS, FL 34433

New Principal Place of Business:

Current Mailing Address:

PO BOX 234
LECANTO, FL 34460

New Mailing Address:

FEI Number: 01-0852904

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWERS, JONATHAN
4250 W MALALUKA CIRCLE
CITRUS SPRINGS, FL 34433 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: P () Delete
Name: POWERS, JONATHAN
Address: 4250 W MALALUKA CIRCLE
City-St-Zip: CITRUS SPRINGS, FL 34433

Title: V () Delete
Name: POWERS, RUTH
Address: 4250 W MALALUKA CIRCLE
City-St-Zip: CITRUS SPRINGS, FL 34433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: RUTH POWERS

VP

04/16/2009

Electronic Signature of Signing Officer or Director

Date