

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000102209

FILED
Apr 12, 2009
Secretary of State

Entity Name: THE SOCIETY FOR PUBLIC SAFETY, INC.

Current Principal Place of Business:

7810 LAND O LAKES BLVD.
BOX PMB348
LAND O LAKES, FL 34638 US

New Principal Place of Business:

Current Mailing Address:

7810 LAND O LAKES BLVD.
BOX PMB348
LAND O LAKES, FL 34638 US

New Mailing Address:

FEI Number: 26-1682148 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIEMER, ROBERT J
7040 PALMETTO PINES LANE
LAND O LAKES, FL 34637 US

Name and Address of New Registered Agent:

DIEMER, ROBERT J
7810 LAND O LAKES BLVD
#348
LAND O LAKES, FL 34638 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:

04/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P-D () Delete
Name: DIEMER, ROBERT J
Address: 7810 LAND O' LAKES BLVD, PMB 348
City-St-Zip: LAND O' LAKES, FL 34638 US

Title: VP-D (X) Delete
Name: MATTESON, RANDE
Address: 7810 LAND O' LAKES BLVD, PMB 348
City-St-Zip: LAND O' LAKES, FL 34638 US

Title: VP-D (X) Delete
Name: LOWERY, GLENN
Address: 7810 LAND O' LAKES BLVD, PMB 348
City-St-Zip: LAND O' LAKES, FL 34638 US

Title: VP-D (X) Delete
Name: KALILL, PAUL M
Address: 7810 LAND O' LAKES BLVD, PMB 348
City-St-Zip: LAND O' LAKES, FL 34638 US

Title: S-D (X) Delete
Name: MORIARTY, ANN M
Address: 7810 LAND O' LAKES BLVD, PMB 348
City-St-Zip: LAND O' LAKES, FL 34638 US

Title: T (X) Delete
Name: SPURGEON, KARISSA
Address: 7810 LAND O' LAKES BLVD, PMB 348
City-St-Zip: LAND O' LAKES, FL 34638 US

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:

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: ROBERT J. DIEMER

PRES

04/12/2009

Electronic Signature of Signing Officer or Director

Date