

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000011118

Entity Name: PUBLIC SAFETY SUPPORT, INC.

FILED  
Feb 02, 2009  
Secretary of State

## Current Principal Place of Business:

6339 MEMORIAL HIGHWAY  
TAMPA, FL 33615

## New Principal Place of Business:

## Current Mailing Address:

6339 MEMORIAL HIGHWAY  
TAMPA, FL 33615

## New Mailing Address:

FEI Number: 26-1955458

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GREENSPOON MARDER, P.A.  
100 W. CYPRESS CREEK ROAD  
SUITE 700  
FORT LAUDERDALE, FL US

## Name and Address of New Registered Agent:

GREENSPOON MARDER, P.A.  
100 W. CYPRESS CREEK ROAD  
SUITE 700  
FORT LAUDERDALE, FL 33309 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: GREGORY BLODIG

02/02/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: KILLCHOWSKI, WILLIAM  
Address: 6339 MEMORIAL HIGHWAY  
City-St-Zip: TAMPA, FL 33615

Title: D ( ) Delete  
Name: HUNTER, MICHAEL  
Address: 1106 W. BRADDOCK STREET  
City-St-Zip: TAMPA, FL 33603

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: KILICHOWSKI, WILLIAM  
Address: 6339 MEMORIAL HIGHWAY  
City-St-Zip: TAMPA, FL 33615

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: WILLIAM KILICHOWSKI

D

02/02/2009

Electronic Signature of Signing Officer or Director

Date