

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000049681

**FILED**  
**Jan 09, 2011**  
**Secretary of State**

**Entity Name:** SPECIALIZED INVESTIGATIVE SUPPORT INC.

**Current Principal Place of Business:**

4809 MIRABELLA PLACE  
LUTZ, FL 335589247

**New Principal Place of Business:**

**Current Mailing Address:**

4809 MIRABELLA PLACE  
LUTZ, FL 335589247

**New Mailing Address:**

**FEI Number:** 26-2732924

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HUNTER, GLENN R  
4809 MIRABELLA PLACE  
LUTZ, FL 335589247 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: DPVT  
Name: HUNTER, GLENN R  
Address: 4809 MIRABELLA PLACE  
City-St-Zip: LUTZ, FL 335589247

Title: S  
Name: HUNTER, GLENN  
Address: 4809 MIRABELLA PLACE  
City-St-Zip: LUTZ, FL 335589247

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: GLENN HUNTER

PRES

01/09/2011

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

\_\_\_\_\_  
Date