

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21598

FILED  
Jan 20, 2009  
Secretary of State

Entity Name: TELE-PRO SYSTEMS INC.

## Current Principal Place of Business:

739B NORTH DRIVE  
MELBOURNE, FL 32934 US

## New Principal Place of Business:

2180 WEATHERLY AVE.  
WEST MELBOURNE, FL 32904 US

## Current Mailing Address:

2180 WEATHERLY AVE  
WEST MELBOURNE, FL 32904 US

## New Mailing Address:

2180 WEATHERLY AVENUE  
WEST MELBOURNE, FL 32904

FEI Number: 51-0299978

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRACKETT, BARBARA J  
2180 WEATHERLY AVE  
WEST MELBOURNE, FL 32904 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: BRACKETT, BARBARA J  
Address: 2180 WEATHERLY AVE  
City-St-Zip: W MELBOURNE, FL 32904 US

Title: V ( ) Delete  
Name: BRACKETT, HAROLD J  
Address: 2180 WEATHERLY AVE  
City-St-Zip: W MELBOURNE, FL 32904 US

Title: S ( ) Delete  
Name: BRACKETT, TODD R  
Address: 4670 MANCHESTER DRIVE  
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: T ( ) Delete  
Name: BRACKETT, MARK J  
Address: 3205 WOODSMILL DRIVE  
City-St-Zip: MELBOURNE, FL 32924 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: BRACKETT, TODD R  
Address: 4670 MANCHESTER DRIVE  
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: BRACKETT, BARBARA J  
Address: 2180 WEATHERLY AVE  
City-St-Zip: WEST MELBOURNE, FL 32904 US

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: BARBARA J BRACKETT

PRES

01/20/2009

Electronic Signature of Signing Officer or Director

Date