

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000007446

**FILED**  
**Feb 25, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA LASER PRINTER SERVICE INC.

**Current Principal Place of Business:**

104 W SENECA AVE  
#7  
TAMPA, FL 33612 US

**New Principal Place of Business:**

**Current Mailing Address:**

104 W SENECA AVE  
#7  
TAMPA, FL 33612 US

**New Mailing Address:**

P.O. BOX 5205  
TAMPA, FL 33675 US

**FEI Number:** 59-3297821

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLINGAN, SELENA M  
819 PEBBLEWOOD DRIVE  
BRANDON, FL 33511 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  
Name: CLINGAN, JAMES R  
Address: 819 PEBBLEWOOD DRIVE  
City-St-Zip: BRANDON, FL 33511

Title: ST  
Name: CLINGAN, SELENA M  
Address: 819 PEBBLEWOOD DRIVE  
City-St-Zip: BRANDON, FL 33511

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:** SELENA M. CLINGAN

ST

02/25/2010

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

\_\_\_\_\_  
Date