

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000021870

FILED  
Apr 25, 2008  
Secretary of State

Entity Name: ROYAL SUPPORT SERVICES, INC.

## Current Principal Place of Business:

2850 AILERON CIR.  
SANFORD, FL 32773 US

## New Principal Place of Business:

## Current Mailing Address:

250 W. LAKE MARY BLVD. STE 245  
SANFORD, FL 32773

## New Mailing Address:

FEI Number: 59-3366734

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOADER, MICHAEL T  
2330 NARCISSUS AVE  
SANFORD, FL 32771 US

## Name and Address of New Registered Agent:

LOADER, MICHAEL T  
2850 AILERON CIR  
SANFORD, FL 32773 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:

04/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVT ( ) Delete  
Name: LOADER, MICHAEL T  
Address: 2330 NARCISSUS AVE  
City-St-Zip: SANFORD, FL 32771

Title: S ( ) Delete  
Name: PARKER, BETSY  
Address: 1704 15TH ST.  
City-St-Zip: PLANO, TX 75074

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVT (X) Change ( ) Addition  
Name: LOADER, MICHAEL T  
Address: 2850 AILERON CIR  
City-St-Zip: SANFORD, FL 32773

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

Title: VP ( ) Change (X) Addition  
Name: LOADER, DONNA L  
Address: 2850 AILERON CIR  
City-St-Zip: SANFORD, FL 32773

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: MICHAEL T. LOADER

PVT

04/25/2008

Electronic Signature of Signing Officer or Director

Date