## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000043379

WELLINGTON, FL 33414

City-St-Zip:

Entity Name: PROCESS CONTROL CONSULTANTS, INC.

FILED Jan 27, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** P.O. BOX 1174 202 SLEEPY HOLLOW DRIVE LOXAHATCHEE, FL 33470 PALM BAY, FL 32905 **Current Mailing Address: New Mailing Address:** P.O. BOX 1174 LOXAHATCHEE, FL 33470 FEI Number: 65-0694866 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCZUREK, FRANK J 14097 GREENTREE DR WELLINGTON, FL 33414 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition KORTUM, ELIZABETH L Name: Name: 14097 GREENTREE DR Address: Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SCZUREK, FRANK J Name: 14097 GREENTREE DR Address: 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: FRANK J. SCZUREK ST 01/27/2009