

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000009476

FILED
Mar 25, 2009
Secretary of State

Entity Name: PRS GROUP, INC.

Current Principal Place of Business:

909 E NEW HAVEN AVE
SUITE 207
MELBOURNE, FL 32901

New Principal Place of Business:

909 E NEW HAVEN AVE
SUITE 203
MELBOURNE, FL 32901

Current Mailing Address:

RD-1
BOX 471
ROARING SPRING, PA 16673

New Mailing Address:

1203 COVE LANE ROAD
ROARING SPRING, PA 16673

FEI Number: 59-3427688

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MAXWELL, DAWN E
909 NEW HAVE AVE.
STE 207
MELBOURNE, FL 32961 US

Name and Address of New Registered Agent:

MAXWELL, DAWN E
909 NEW HAVE AVE.
STE 203
MELBOURNE, FL 32961 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: DAWN E. MAXWELL

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: LEHMAN, DAVID B
Address: RD-1, BOX 471
City-St-Zip: ROARING SPRING, PA 16673]

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: LEHMAN, DAVID B
Address: 1203 COVE LANE ROAD
City-St-Zip: ROARING SPRING, PA 16673]

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: DAVID B. LEHMAN

TREA

03/25/2009

Electronic Signature of Signing Officer or Director

Date