

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000077491

FILED  
Mar 04, 2009  
Secretary of State

Entity Name: PROTOCOL OFFICE AND RESIDENTIAL SERVICES, INC.

## Current Principal Place of Business:

8961 S.E. BRIDGE ROAD  
HOBE SOUND, FL 33455

## New Principal Place of Business:

## Current Mailing Address:

P. O. BOX 938  
HOBE SOUND, FL 33475

## New Mailing Address:

FEI Number: 65-0950880

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

INGRAM, WILLIAM JR.  
11130 SE FEDERAL HWY.  
HOBE SOUND, FL 33455 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: KRISKE, MARY  
Address: 6412 SHERWOOD ST  
City-St-Zip: HOBE SOUND, FL 33455

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP ( ) Change (X) Addition  
Name: KRISKE, ROBERT G  
Address: 6412 SHERWOOD STREET  
City-St-Zip: HOBE SOUND, FL 33455

Title: S ( ) Change (X) Addition  
Name: SCHWARTZ, JAIME  
Address: 1682 SW LOFGREN AVENUE  
City-St-Zip: PORT ST. LUCIE, FL 34953

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: MARY M. KRISKE

P

03/04/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date