

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V50480

FILED  
Apr 25, 2011  
Secretary of State

Entity Name: HTRS SERVICES CORP.

**Current Principal Place of Business:**

107 HAMPTON ROAD  
STE 200  
CLEARWATER, FL 33759 US

**New Principal Place of Business:**

**Current Mailing Address:**

107 HAMPTON ROAD  
STE 200  
CLEARWATER, FL 33759 US

**New Mailing Address:**

FEI Number: 59-3244862      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

KIEFER, NEIL G  
107 HAMPTON ROAD  
STE 200  
CLEARWATER, FL 33759 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: KIEFER, NEIL G  
Address: 7296 BRYCE POINT  
City-St-Zip: PINELLAS PARK, FL 33782

Title: DVP  
Name: DIGIANNANTONIO, GILBERT  
Address: 3717 WOODRIDGE PLACE  
City-St-Zip: PALM HARBOR, FL 34684

Title: DST  
Name: RANIERI, WILLIAM  
Address: 949 SKYE LANE  
City-St-Zip: PALM HARBOR, FL 34683

Title: D  
Name: DROSTE, EDWARD C  
Address: 20 MIDWAY ISLAND  
City-St-Zip: CLEARWATER, FL 33767

Title: D  
Name: JOHNSON, DENNIS D  
Address: 277 ABERDEEN STREET  
City-St-Zip: DUNEDIN, FL 34698

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: NEIL G. KIEFER

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04/25/2011

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

\_\_\_\_\_  
Date