## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V50572

Address:

City-St-Zip:

7500 WAUNATTA CT

WINTER PARK, FL 32792

FILED Jan 14, 2009 Secretary of State

Entity Nan	ne: DROESSL	ER SERVICES, INC.		·	
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	NATTA CT. ARK, FL 3279	2			
Current Mailing Address:			New Mailing Address:		
7500 WAUNATTA CT. WINTER PARK, FL 32792					
FEI Number:	59-3144395	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
DROESSLER, ARUEL L 7500 WAUNATTA CT. WINTER PARK, FL 32792 US			7500 WAUNATTA CT.	DROESSLER, ARVEL L 7500 WAUNATTA CT. WINTER PARK, FL 32792 US	
The above in the State		ubmits this statement for the pเ	urpose of changing its registered	office or registered agent, or both,	
SIGNATURE: ARVEL DROESSLER				01/14/2009	
	Electroni	c Signature of Registered Ager	nt	Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VT () CHAPMAN, JOLI 122 ANNIE ST ORLANDO, FL		Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	P () DROESSLER, A 7500 WAUNATT. WINTER PARK,	A CT.	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	S () DROESSLER, C 10216 POINT PL ORLANDO, FL	-	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name:	T () DROESSLER, K	Delete ATHLEEN	Title: ( Name:	) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: ARVEL DROESSLER Ρ 01/14/2009