

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V50480

Entity Name: HTRS SERVICES CORP.**Current Principal Place of Business:**107 HAMPTON ROAD
STE 200
CLEARWATER, FL 33759**Current Mailing Address:**107 HAMPTON ROAD
STE 200
CLEARWATER, FL 33759 US**FEI Number:** 59-3244862**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KIEFER, NEIL G
107 HAMPTON ROAD
STE 200
CLEARWATER, FL 33759 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**Officer/Director Detail :**

Title	DP
Name	KIEFER, NEIL G
Address	107 HAMPTON ROAD, SUITE 200
City-State-Zip:	CLEARWATER FL 33759

Title	ST
Name	CLARK, BRUCE W
Address	2125 PINNACLE CIRCLE SOUTH
City-State-Zip:	PALM HARBOR FL 34684

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

Title	DVP
Name	DIGIANNANTONIO, GILBERT
Address	107 HAMPTON ROAD, SUITE 200
City-State-Zip:	CLEARWATER FL 33759

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

Title	D
Name	MELILLI, SALVATORE J.
Address	4076 GARDEN AVENUE
City-State-Zip:	WESTERN SPRINGS IL 60558

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**PRESIDENT****05/13/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date