

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000003516

FILED
May 28, 2020
Secretary of State
7271137731CC

Entity Name: INTEGRATED PROTECTION SERVICES, INC.

Current Principal Place of Business:

5303 LESTER ROAD
CINCINNATI, OH 45213

Current Mailing Address:

5303 LESTER ROAD
CINCINNATI, OH 45213 US

FEI Number: 31-1471747

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 DIRECTOR
Name ORTNER, STEVEN R.
Address 5303 LESTER ROAD
City-State-Zip: CINCINNATI OH 45213

Title DIRECTOR
Name HARTMAN, GARFIELD W.
Address 5303 LESTER ROAD
City-State-Zip: CINCINNATI OH 45213

Title DIRECTOR
Name BOYD, MICHAEL "ANDY"
Address 5303 LESTER ROAD
City-State-Zip: CINCINNATI OH 45213

Title TREASURER
Name ORTNER, STEVEN R.
Address 5303 LESTER ROAD
City-State-Zip: CINCINNATI OH 45213

Title CEO
Name HARTMAN, GARFIELD W.
Address 5303 LESTER ROAD
City-State-Zip: CINCINNATI OH 45213

Title PRESIDENT
Name BOYD, MICHAEL "ANDY"
Address 5303 LESTER ROAD
City-State-Zip: CINCINNATI OH 45213

Title SECRETARY
Name BOYD, MICHAEL "ANDY"
Address 5303 LESTER ROAD
City-State-Zip: CINCINNATI OH 45213

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: MICHAEL "ANDY" BOYD

PRESIDENT

05/28/2020

Electronic Signature of Signing Officer/Director Detail

Date