## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 733705** 

FILED Jan 05, 2009 Secretary of State

Entity Name: ZIRKEL'S ESTATES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 6153 ZIRKEL CIRCLE BROOKSVILLE, FL 34604 **Current Mailing Address: New Mailing Address:** 6153 ZIRKEL CIRCLE BROOKSVILLE, FL 34604 FEI Number: 39-6200064 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SINGER, JOSEPH SINGER, JOSEPH 6153 ZICKEL CIRCLE 6153 ZIRKEL CIRCLE BROOKSVILLE, FL 34604 BROOKSVILLE, FL 34604 US 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: 01/05/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete RECKNAGEL, JAMES Name: Name: 6170 ZIRKEL CIRCLE Address: Address: City-St-Zip: BROOKSVILLE, FL City-St-Zip: Title: () Delete Title: () Change () Addition Name: RUSSO, VINCENT, Name: Address: 6115 ZIRKEL CIRCLE Address: City-St-Zip: BROOKSVILLE, FL City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition KORECKI, NICHOLAS Name: KORECKI, NICHOLAS Name: 6179 ZICKEL CIRCLE 6179 ZIRKEL CIRCLE Address: Address: City-St-Zip: BROOKSVILLE, FL 34604 City-St-Zip: BROOKSVILLE, FL 34604 Title: () Delete Title: (X) Change ( ) Addition Name: SINGER, JOSEPH A Name: SINGER, JOSEPH A Address: 6153 ZICKEL CIRCLE Address: 6153 ZIRKEL CIRCLE City-St-Zip: BROOKSVILLE, FL 34604 City-St-Zip: BROOKSVILLE, FL 34604 Title: () Delete Title: () Change () Addition LONIGRO, PJ Name: Name: 6241 ZIRKELS CIRCLE Address: Address: BROOKSVILLE, FL 34604 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition HASTY, DEBRA Name: Name: Address: 6170 ZIRKELS CIRCLE Address: BROOKSVILLE, FL 34604 City-St-Zip: City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH A SINGER RA 01/05/2009