

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K50138

**FILED**  
**Mar 09, 2010**  
**Secretary of State**

**Entity Name:** MARSHALL S. ADLER, P.A.

**Current Principal Place of Business:**

430 N MILLS AVE  
ORLANDO, FL 32803

**New Principal Place of Business:**

430 N MILLS AVE  
SUITE 1  
ORLANDO, FL 32803

**Current Mailing Address:**

430 N MILLS AVE  
ORLANDO, FL 32803 US

**New Mailing Address:**

430 N MILLS AVE  
SUITE 1  
ORLANDO, FL 32803 US

**FEI Number:** 59-2922394

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ADLER, MARSHALL S.  
1035 EDMISTON PL  
LONGWOOD, FL 32779 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ADLER, MARSHALL S.  
Address: 1035 EDMISTON PL  
City-St-Zip: LONGWOOD, FL 32779

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: MARSHALL ADLER

OWNE

03/09/2010

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

\_\_\_\_\_ Date