


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 02, 2008 8:00 am
Secretary of State

09-02-2008 90031 044 ***150.00

DOCUMENT # P04000088283

1. Entity Name
GLATTER & ASSOCIATES, P.A.



Principal Place of Business Mailing Address
 2000 GLADES RD 2000 GLADES RD
 SUITE 204 SUITE 204
 BOCA RATON, FL 33431 BOCA RATON, FL 33431

40114831



Business Address closed as of January 2008

2. Principal Place of Business - No P.O. Box # 3. Mailing Address
c/o Ellis & Hodes, 2385 Executive Center Drive
 Suite, Apt. #, etc. Suite, Apt. #, etc.

08222008 Chg-P CR2E034 (12/06)

City & State City & State
Boca Raton FL
 Zip Country Zip Country
33431 U.S.

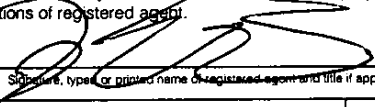
4. FEI Number Applied For
20-1292267 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
GLATTER, ERIC
1489 WEST PALMETTO PARK ROAD
SUITE 420
BOCA RATON, FL 33486

7. Name and Address of New Registered Agent
 Name
Seth E. Ellis, Esq. Ellis & Hodes
 Street Address (P.O. Box Number is Not Acceptable)
2385 Executive Center Drive
Suite 190
 City **FL** Zip Code
Boca Raton **33431**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  DATE: 8/28/08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	GLATTER, ERIC
STREET ADDRESS	1489 WEST PALMETTO PARK ROAD SUITE 420
CITY - ST - ZIP	BOCA RATON, FL 33486
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Pearl H. Glatter, Personal Representative of the Estate of Eric S. Glatter
STREET ADDRESS	2385 Executive Center Drive
CITY - ST - ZIP	Boca Raton, FL 33431
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE: 8/28/08 DAYTIME PHONE #: 561-988-0075

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #