

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000148041

**FILED**  
**Jan 27, 2010**  
**Secretary of State**

**Entity Name:** TODD EDWARD DEFILIPPS, P.A.

**Current Principal Place of Business:**

1625 DOLPHIN ROAD  
NAPLES, FL 34102

**New Principal Place of Business:**

1100 8TH AVE. S.  
210B  
NAPLES, FL 34102

**Current Mailing Address:**

1625 DOLPHIN ROAD  
NAPLES, FL 34102

**New Mailing Address:**

1100 8TH AVE. S.  
210B  
NAPLES, FL 34102

**FEI Number:** 20-1878906

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DEFILIPPS, TODD E  
1625 DOLPHIN ROAD  
NAPLES, FL 34102 US

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

DEFILIPPS, TODD E  
1100 8TH AVE S.  
210B  
NAPLES, FL 34102 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: TODD E. DEFILIPPS

01/27/2010

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: DEFILIPPS, TODD E  
Address: 1100 8TH AVE S. #210B  
City-St-Zip: NAPLES, FL 34102

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: TODD E. DEFILIPPS

P

01/27/2010

Electronic Signature of Signing Officer or Director

Date