

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000024479

**FILED**  
**Jan 22, 2010**  
**Secretary of State**

**Entity Name:** CRAIG ALAN RADLEY, P.A.

**Current Principal Place of Business:**

743 NEEDLE GRASS DRIVE  
ST. AUGUSTINE, FL 32086 US

**New Principal Place of Business:**

3505-1 US HIGHWAY 1 SOUTH  
ST. AUGUSTINE, FL 32086 US

**Current Mailing Address:**

743 NEEDLE GRASS DRIVE  
ST. AUGUSTINE, FL 32086 US

**New Mailing Address:**

1102 TULANE DRIVE  
MOUNTAIN VIEW, CA 94040 US

FEI Number: 20-2345659

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RADLEY, CRAIG A  
743 NEEDLE GRASS DRIVE  
ST. AUGUSTINE, FL 32086 US

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

ABOULAFIA, DAVID  
6857 SEA COVE AVENUE WEST  
ST AUGUSTINE, FL 32086 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: DAVID ABOULAFIA

01/22/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPST  
Name: RADLEY, CRAIG A  
Address: 1102 TULANE DRIVE  
City-St-Zip: MOUNTAIN VIEW, CA 94040 US

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: CRAIG A RADLEY

P

01/22/2010

Electronic Signature of Signing Officer or Director

Date