

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000024707

**FILED**  
**Jan 19, 2009**  
**Secretary of State**

**Entity Name:** DONNA E. DEMARCHI, P.A.

**Current Principal Place of Business:**

901 SW MARTIN DOWNS BOULEVARD  
201  
PALM CITY, FL 34990

**New Principal Place of Business:**

901 SW MARTIN DOWNS BOULEVARD  
200F  
PALM CITY, FL 34990

**Current Mailing Address:**

901 SW MARTIN DOWNS BOULEVARD  
201  
PALM CITY, FL 34990

**New Mailing Address:**

901 SW MARTIN DOWNS BOULEVARD  
200F  
PALM CITY, FL 34990

**FEI Number:** 26-2124719

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DEMARCHI, DONNA E  
901 SW MARTIN DOWNS BOULEVARD  
201  
PALM CITY, FL 34990 US

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

DEMARCHI, DONNA E  
901 SW MARTIN DOWNS BOULEVARD  
200F  
PALM CITY, FL 34990 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: \_\_\_\_\_

Electronic Signature of Registered Agent

01/19/2009

Date

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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DEMARCHI, DONNA E  
Address: 901 SW MARTIN DOWNS BLVD, SUITE 201  
City-St-Zip: PALM CITY, FL 34990

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: DEMARCHI, DONNA E  
Address: 901 SW MARTIN DOWNS BLVD, SUITE 200F  
City-St-Zip: PALM CITY, FL 34990

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

SIGNATURE: DONNA E. DEMARCHI

PD

01/19/2009

Electronic Signature of Signing Officer or Director

Date