

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000034823

FILED  
Apr 28, 2011  
Secretary of State

**Entity Name:** VALENTI FLORIDA MANAGEMENT, INC.

**Current Principal Place of Business:**

3450 BUSCHWOOD PARK DR  
SUITE 195  
TAMPA, FL 33618

**New Principal Place of Business:**

**Current Mailing Address:**

3450 BUSCHWOOD PARK DR  
SUITE 195  
TAMPA, FL 33618

**New Mailing Address:**

**FEI Number:** 59-3442362

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NESBITT, STEVEN M  
3450 BUSCHWOOD PARK DR  
SUITE 195  
TAMPA, FL 33618 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

**OFFICERS AND DIRECTORS:**

Title: OFCR  
Name: VALENTI, DARRELL J  
Address: 3450 BUSCHWOOD PARK DR, SUITE 195  
City-St-Zip: TAMPA, FL 33618 US

Title: OFCR  
Name: NESBITT, STEVEN M  
Address: 3450 BUSCHWOOD PARK DRIVE, SUITE 195  
City-St-Zip: TAMPA, FL 33618 US

Title: OFCR  
Name: GRANT, PETER J  
Address: 946 BROKEN ARROW COVE  
City-St-Zip: COLLIERVILLE, TN 38017

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: STEVEN M. NESBITT

OFCR

04/28/2011

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

\_\_\_\_\_ Date