



**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 26, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # V10779</b> 1. Entity Name HARRIS, GUIDI, ROSNER, DUNLAP & RUDOLPH, P.A.	
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Principal Place of Business % ROBERT M. HARRIS 1837 HENDRICKS AVENUE JACKSONVILLE, FL 32207	Mailing Address % ROBERT M. HARRIS 1837 HENDRICKS AVENUE JACKSONVILLE, FL 32207
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**DO NOT WRITE IN THIS SPACE**



04202007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3103381	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

HARRIS, ROBERT M.  
1837 HENDRICKS AVENUE  
JACKSONVILLE, FL 32207

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  **\$5.00** May Be Added to Fees  
 - Trust Fund Contribution.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRIS, ROBERT M. 1837 HENDRICKS AVE JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSNER, ALAN E. 1837 HENDRICKS AVE JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUIDI, DENNIS E 1837 HENDRICKS AVE. JACKSONVILLE, FL
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05/09/07-80093-023 150.00

**DO NOT WRITE IN THIS SPACE**

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: 4/24/09 Daytime Phone # \_\_\_\_\_