

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000038243

Entity Name: ZLB & ASSOCIATES INC.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

5761 S. ORANGE BLOSSOM TRAIL
2
ORLANDO, FL 32839

New Principal Place of Business:

6215 WINEGARD ROAD
2
ORLANDO, FL 32809

Current Mailing Address:

4663 CAVERNS DRIVE
KISSIMMEE, FL 34758

New Mailing Address:

FEI Number: 42-1761304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DERTES, GILBERT
4663 CAVERNS DRIVE
KISSIMMEE, FL 34758 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: DERTES, GILBERT
Address: 4663 CAVERNS DRIVE
City-St-Zip: KISSIMME, FL 34758

Title: ACCT () Delete
Name: TOUSSAINT, CAROL
Address: 5569 S. ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32839

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: DERTES, LORPHINE
Address: 4663 CAVERNS DRIVE
City-St-Zip: KISSIMME, FL 34758

Title: ACCT () Change (X) Addition
Name: TOUSSAINT, CAROL
Address: 5569 S. ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32839

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: GILBERT DERTES

PRES

03/24/2009

Electronic Signature of Signing Officer or Director

_____ Date