

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 285196

FILED
Apr 12, 2009
Secretary of State

Entity Name: 2460 CORPORATION

Current Principal Place of Business:

2460 SOUTH FEDERAL HIGHWAY
BOYNTON BEACH, FL 33435

New Principal Place of Business:

Current Mailing Address:

2460 SOUTH FEDERAL HIGHWAY
BOYNTON BEACH, FL 33435

New Mailing Address:

FEI Number: 59-1387070 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOULIHAN, MARYANN
2460 S FED HWY
APT 8
BOYNTON BEACH, FL 33435 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: T () Delete
Name: O'DONNELL, JAMES
Address: 2460 S. FEDERAL HWY., #17
City-St-Zip: BOYNTON BCH, FL

Title: P () Delete
Name: TACELLI, RICHARD
Address: 2460 S. FEDERAL HWY., #20
City-St-Zip: BOYNTON BCH, FL

Title: D () Delete
Name: KORNMAYER, HAROLD
Address: 2460 S FED HWY #6
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D () Delete
Name: HOULIHAN, JAMES
Address: 2460 S FEDERAL HWY #8
City-St-Zip: BOYNTON BEACH, FL 33435

Title: VP () Delete
Name: VENTRE, AL
Address: 2460 S. FEDERAL HWY. #19
City-St-Zip: BOYNTON BEACH, FL 33435

Title: S () Delete
Name: HOULIHAN, MARYANN
Address: 2460 S. FEDERAL HWY #8
City-St-Zip: BOYNTON BCH, FL 33435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: JAMES O'DONNELL

T

04/12/2009

Electronic Signature of Signing Officer or Director

_____ Date