2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 519622

Entity Name: CASORIA & GOFF, P.A.

City-St-Zip: FORT LAUDERDALE, FL 33304

FILED Jan 06, 2009 Secretary of State

Ellilly Nai	IIIe: CASORII	A & GOFF, P.A.			
Current P	rincipal Place	e of Business:	New Principal Place o	of Business:	
SUITE 422		333042522 US			
Current M	lailing Addres	ss:	New Mailing Address:		
SUITE 422		333042522 US			
FEI Number	: 59-1702927	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of (Current Registered Agent:	Name and Address of	New Registered Agent:	
FT. LAUDI	VIEW DRIVE, ERDALE, FL	33304 US	purpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CASORIA, S. N 1040 BAYVIEV		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	SD (GOFF, CHARL		Title: Name: Address:	() Change () Addition	

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: S. M. CASORIA, III P 01/06/2009