

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006873

**FILED**  
**Jan 07, 2009**  
**Secretary of State**

**Entity Name:** HORNBY ZELLER ASSOCIATES, INC.

**Current Principal Place of Business:**

48 FOURTH STREET STE 300  
TROY, NY 12180

**New Principal Place of Business:**

48 FOURTH STREET  
SUITE 300  
TROY, NY 12180

**Current Mailing Address:**

48 FOURTH STREET STE 300  
TROY, NY 12180

**New Mailing Address:**

**FEI Number:** 14-1777722      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** P ( ) Delete  
**Name:** ZELLER, DENNIS E  
**Address:** 48 FOURTH STREET STE 300  
**City-St-Zip:** TROY, NY 12180

**Title:** VP ( ) Delete  
**Name:** HORNBY, HELAINE  
**Address:** 100 COMMERCIAL STREET STE 300  
**City-St-Zip:** PORTLAND, ME 04101

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

**Title:** VP (X) Change ( ) Addition  
**Name:** HORNBY, HELAINE  
**Address:** 373 BROADWAY ST  
**City-St-Zip:** SOUTH PORTLAND, ME 04106

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:** DENNIS E ZELLER

P

01/07/2009

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

\_\_\_\_\_  
Date