## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000002864

Entity Name: DAVID MENNA COMPANY

FILED Jun 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1955 LOWER ROSWELL ROAD SUITE A MARIETTA, GA 30068

Current Mailing Address: New Mailing Address:

1955 LOWER ROSWELL ROAD SUITE A MARIETTA, GA 30068

FEI Number: 58-2279435 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

TAX ACCOUNTING & FINANCIAL ASSOCIATES INC.
809 WALKERBILT ROAD
SUITE 5
NAPLES, FL 34110 US

TAX & ACCOUNTING OF SOUTHWEST FLORIDA, LLC
809 WALKERBILT ROAD
SUITE 6
NAPLES, FL 34110 US

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: BENJAMIN J. COTTRELL 06/23/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MENNA, DAVID C
 Name:

 Address:
 1955 LOWER ROSWELL ROAD - SUITE A
 Address:

 City-St-Zip:
 MARIETTA, GA 30068
 City-St-Zip:

Title: PS () Delete Title: () Change () Addition

 Name:
 MENNA, DAVID C
 Name:

 Address:
 1955 LOWER ROSWELL ROAD - SUITE A
 Address:

 City-St-Zip:
 MARIETTA, GA 30068
 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: BENJAMIN J. COTTRELL RA 06/23/2009