# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT# F99000003720

**Entity Name:** PENTA ASSOCIATES, INC.

**Current Principal Place of Business:**

3650 VIENNA DR
APTOS, CA 95003 US

**New Principal Place of Business:**

**Current Mailing Address:**

3650 VIENNA DR
APTOS, CA 95003 US

**New Mailing Address:**

**FEI Number: 94-1585098** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

APOLLO REALTY, INC
1485 N ATLANTIC AVE
COCOA BEACH, FL 32931 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: CPD ( ) Delete
Name: CANNIZZARO, JAMES
Address: 3650 VIENNA DR
City-St-Zip: APTOS, CA 95003 US

Title: D ( ) Delete
Name: CANNIZZARO, PAMELA
Address: 3650 VIENNA DRIVE
City-St-Zip: APTOS, CA 95003 US

Title: DV ( ) Delete
Name: SOKOL, JOHN E
Address: 1080 ALDERBROOK LANE
City-St-Zip: SAN JOSE, CA 95129 US

Title: D ( ) Delete
Name: BLOECHER, GRACE
Address: 680 VIA MANZANA
City-St-Zip: AROMAS, CA 95004 US

Title: DS ( ) Delete
Name: HOLTZCLAW, MARLENE
Address: 1061 WALLACE AVE
City-St-Zip: APTOS, CA 95003 US

Title: DT ( ) Delete
Name: RUSSELL, FRANCES
Address: 8673 LORDS MANOR WAY
City-St-Zip: ROHNERT PARK, CA 94928 US

**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 CANNIZZARO PRES 05/07/2009

Electronic Signature of Signing Officer or Director Date