

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G16303

FILED  
Apr 30, 2010  
Secretary of State

**Entity Name:** KOZYAK TROPIN & THROCKMORTON, P.A.

**Current Principal Place of Business:**

2525 PONCE DE LEON BLVD.  
9TH FLOOR  
MIAMI,, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

2525 PONCE DE LEON BLVD.  
9TH FLOOR  
MIAMI,, FL 33134 US

**New Mailing Address:**

**FEI Number:** 59-2240304      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

KOZYAK, JOHN W  
2525 PONCE DE LEON BLVD.  
9TH FLOOR  
MIAMI, FL 33134 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  
Name: KOZYAK, JOHN W.  
Address: 9840 SW 63RD CT  
City-St-Zip: MIAMI, FL 33156

Title: V  
Name: TROPIN, HARLEY S.  
Address: 5845 SW 93 ST  
City-St-Zip: MIAMI, FL 33156

Title: S  
Name: THROCKMORTON, CHARLES W.  
Address: 10005 SW 63RD PLACE  
City-St-Zip: MIAMI, FL 33156

Title: D  
Name: HARTMANN, KENNETH R  
Address: 11360 SW 60 AVE  
City-St-Zip: MIAMI, FL 33156

Title: D  
Name: MCQUILKIN, GAIL A  
Address: 1521 ALTON RD 545  
City-St-Zip: MIAMI BEACH, FL 33139

I hereby 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 all other like empowered.

SIGNATURE: JOHN W. KOZYAK

P

04/30/2010

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

\_\_\_\_\_  
Date