

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G66918

FILED  
Mar 10, 2009  
Secretary of State

Entity Name: SINGHOFEN & ASSOCIATES, INC.

**Current Principal Place of Business:**

925 SOUTH SEMORAN BLVD  
SUITE 104  
WINTER PARK, FL 32792 US

**New Principal Place of Business:**

**Current Mailing Address:**

925 SOUTH SEMORAN BLVD  
SUITE 104  
WINTER PARK, FL 32792 US

**New Mailing Address:**

FEI Number: 59-2341111      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

BOULICAULT, KENT  
925 SOUTH SEMORAN BLVD  
SUITE 104  
WINTER PARK, FL 32792 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: VP ( ) Delete  
Name: TROILO, MARK X VP/D  
Address: 925 SOUTH SEMORAN BLVD, STE 104  
City-St-Zip: WINTER PARK, FL 32792 US

Title: T/S ( ) Delete  
Name: BOULICAULT, KENT T/S/D  
Address: 925 SOUTH SEMORAN BLVD, STE 104  
City-St-Zip: WINTER PARK, FL 32792 OS

Title: P/D ( ) Delete  
Name: GAYLORD, ROBERT B P/D  
Address: 925 SOUTH SEMORAN BLVD, STE 104  
City-St-Zip: WINTER PARK, FL 32792 US

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

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

Title: T/S (X) Change ( ) Addition  
Name: BOULICAULT, KENT J T/S/D  
Address: 925 SOUTH SEMORAN BLVD, STE 104  
City-St-Zip: WINTER PARK, FL 32792 US

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: KENT J. BOULICAULT

T/S

03/10/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date