

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H75336

FILED  
Jul 04, 2010  
Secretary of State

**Entity Name:** ALBERT M. ESPOSITO & ASSOCIATES, INC.

**Current Principal Place of Business:**

206 MOODY BLVD.  
FLAGLER BCH, FL 321368836

**New Principal Place of Business:**

**Current Mailing Address:**

206 MOODY BLVD.  
P.O. BOX 1836  
FLAGLER BCH, FL 321368836

**New Mailing Address:**

PO BOX 1836  
FLAGLER BCH, FL 321368836

**FEI Number:** 59-2578604

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ESPOSITO, ALBERT M.  
206 MOODY BLVD.  
FLAGLER BCH, FL 32136 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ESPOSITO, ALBERT M.  
Address: 200 LAMBERT AVE., STE 2  
City-St-Zip: FLAGLER BCH, FL 32136

Title: VTSD  
Name: WHITE, NANCY C  
Address: 301 CEDAR LN, P.O. BOX 766  
City-St-Zip: FLAGLER BCH, FL 32136

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: NANCY C WHITE

VTSD

07/04/2010

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

\_\_\_\_\_  
Date