

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J32209

FILED  
Jan 10, 2011  
Secretary of State

**Entity Name:** GRAVINA, SMITH & MATTE, INC.

**Current Principal Place of Business:**

1520 ROYAL PALM SQUARE BLVD  
SUITE 160  
FT. MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

1520 ROYAL PALM SQUARE BLVD  
SUITE 160  
FT. MYERS, FL 33919

**New Mailing Address:**

**FEI Number:** 59-2727278

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRAVINA, PETER J.  
1833 HENDRY ST.  
FT. MYERS, FL 33901 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: MATTE, TINA  
Address: 1520 ROYAL PALM SQUARE BLVD., #160  
City-St-Zip: FORT MYERS, FL 33919

Title: VPS  
Name: SMITH, LAUREL  
Address: 1520 ROYAL PALM SQUARE BLVD., #160  
City-St-Zip: FORT MYERS, FL 33919

Title: VP  
Name: ISLEY, MELINDA  
Address: 1520 ROYAL PALM SQ BLVD, # 160  
City-St-Zip: FORT MYERS, FL 33919

Title: VP  
Name: ARNOLD, SHARON  
Address: 1520 ROYAL PALM SQ BLVD, # 160  
City-St-Zip: FORT MYERS, FL 33919

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: TINA MATTE

PD

01/10/2011

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

\_\_\_\_\_  
Date