

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K58555

FILED  
Apr 30, 2011  
Secretary of State

**Entity Name:** KATHERINE LANDFAIR, C.P.A., P.A.

**Current Principal Place of Business:**

824 FLOWER FIELDS LANE  
ORLANDO, FL 328246160 US

**New Principal Place of Business:**

**Current Mailing Address:**

824 FLOWER FIELDS LANE  
ORLANDO, FL 328246160 US

**New Mailing Address:**

FEI Number: 59-2921179

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LANDFAIR, KATHERINE  
824 FLOWER FIELDS LANE  
ORLANDO, FL 328246160 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: D  
Name: LANDFAIR, KATHERINE  
Address: 824 FLOWER FIELDS LANE  
City-St-Zip: ORLANDO, FL 328246160

Title: PST  
Name: LANDFAIR, KATHERINE  
Address: 824 FLOWER FIELDS LANE  
City-St-Zip: ORLANDO, FL 328246160

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: KATHERINE LANDFAIR

PRES

04/30/2011

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

\_\_\_\_\_ Date