

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K68917

FILED
Mar 03, 2009
Secretary of State

Entity Name: V.G. VARIAN ASSOCIATES, P.A.

Current Principal Place of Business:

2000 N. DIXIE HWY
SUITE 100
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

2000 N. DIXIE HWY
SUITE 100
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 65-0101897 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VARIAN, NANCY
121 ROYAL PALM WAY
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

VARIAN, NANCY E DVP
121 ROYAL PALM WAY
BOCA RATON, FL 33432 US

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: NANCY E. VARIAN

03/03/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: VARIAN, VAHAN G.,
Address: 121 ROYAL PALM WAY
City-St-Zip: BOCA RATON, FL 33432

Title: DVP () Delete
Name: VARIAN, NANCY,
Address: 121 ROYAL PALM WAY
City-St-Zip: BOCA RATON, FL 33432

Title: T () Delete
Name: VARIAN, NANCY
Address: 121 ROYAL PALM WAY
City-St-Zip: BOCA RATON, FL 33432

Title: S () Delete
Name: VARIAN, NANCY E
Address: 121 ROYAL PALM WAY
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: VARIAN, VAHAN G DP
Address: 121 ROYAL PALM WAY
City-St-Zip: BOCA RATON, FL 33432

Title: DVP (X) Change () Addition
Name: VARIAN, NANCY E DVP
Address: 121 ROYAL PALM WAY
City-St-Zip: BOCA RATON, FL 33432

Title: T (X) Change () Addition
Name: VARIAN, NANCY E
Address: 121 ROYAL PALM WAY
City-St-Zip: BOCA RATON, FL 33432

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: NANCY E. VARIAN

DVP

03/03/2009

Electronic Signature of Signing Officer or Director

Date