

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L01979

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** ROGER GRUNKE AND ASSOCIATES, INC.

**Current Principal Place of Business:**

1906 W. MORRISON AVE  
TAMPA, FL 33606 US

**New Principal Place of Business:**

502 E ROSS AV #B-13  
TAMPA, FL 33602 US

**Current Mailing Address:**

1906 W. MORRISON AVE  
TAMPA, FL 33606 US

**New Mailing Address:**

502 E ROSS AV #B-13  
TAMPA, FL 33602 US

**FEI Number:** 59-3014277

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRUNKE, ROGER H  
1906 MORRISON AVE  
TAMPA, FL 33606 US

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

GRUNKE, ROGER H  
502 E ROSS AV #B-13  
TAMPA, FL 33602 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/28/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: GRUNKE, ROGER H  
Address: 502 E ROSS AV #B-13  
City-St-Zip: TAMPA, FL 33602

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: ROGER GRUNKE

PRES

04/28/2011

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

\_\_\_\_\_  
Date