

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L22421

FILED  
Jan 11, 2011  
Secretary of State

**Entity Name:** POWELL, FRAGALA & ASSOCIATES, INC.

**Current Principal Place of Business:**

5130 S. FLORIDA AVENUE  
BLDG. D 401  
LAKELAND, FL 33813 US

**New Principal Place of Business:**

202 E STUART AVENUE  
LAKE WALES, FL 33853 US

**Current Mailing Address:**

P O BOX 6467  
LAKELAND, FL 33807 US

**New Mailing Address:**

P O BOX 551  
LAKE WALES, FL 338590551 US

**FEI Number:** 59-2974155

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

FRAGALA, AUGUSTINE M. JR.  
5130 S FLORIDA AVE  
BLDG. D 401  
LAKELAND, FL 33813 US

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

FRAGALA, AUGUSTINE M. JR.  
202 E STUART AVENUE  
LAKE WALES, FL 33853 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: AUGUSTINE M. FRAGALA, JR.

01/11/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DVP  
Name: FRAGALA, AUGUSTINE M. JR.  
Address: 6223 PINE LANE  
City-St-Zip: LAKELAND, FL 33813

Title: DPST  
Name: FRAGALA, I. LOUISE  
Address: 6223 PINE LANE  
City-St-Zip: LAKELAND, FL 33813

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: AUGUSTINE M. FRAGALA, JR.

DVP

01/11/2011

Electronic Signature of Signing Officer or Director

Date