

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L33616

FILED
Jan 05, 2009
Secretary of State

Entity Name: WALTERS/GOTTLIEB PARTNERS, INC.

Current Principal Place of Business:

250 S. AUSTRALIAN AVE
SUITE 1100
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

250 S. AUSTRALIAN AVE
SUITE 1100
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 65-0160596 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GOTTLIEB, GARY A
250 S. AUSTRALIAN AVE
SUITE 1100
WEST PALM BEACH, FL 33401 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: WALTERS, MICHAEL J.,
Address: 250 S. AUSTRALIAN AVE #1100
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VPT () Delete
Name: GOTTLIEB, GARY,
Address: 250 S. AUSTRALIAN BLVD #1101
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: WALTERS, MICHAEL J
Address: 250 S. AUSTRALIAN AVE #1100
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VPT (X) Change () Addition
Name: GOTTLIEB, GARY A
Address: 250 S. AUSTRALIAN AVE #1100
City-St-Zip: WEST PALM BEACH, FL 33401

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: MICHAEL J WALTERS

PS

01/05/2009

Electronic Signature of Signing Officer or Director

Date