

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L49179

FILED  
Feb 08, 2011  
Secretary of State

Entity Name: CATHERINE NOVAK, E.A. INC.

**Current Principal Place of Business:**

8695 COLLEGE PARKWAY  
# 2262  
FORT MYERS, FL 33919 US

**New Principal Place of Business:**

**Current Mailing Address:**

8695 COLLEGE PARKWAY  
# 2262  
FORT MYERS, FL 33919 US

**New Mailing Address:**

FEI Number: 65-0177815      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

NOVAK, CATHERINE  
8695 COLLEGE PARKWAY  
# 2262  
FORT MYERS, FL 33919 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: PD  
Name: NOVAK, CATHERINE  
Address: 8695 COLLEGE PARKWAY # 2262  
City-St-Zip: FORT MYERS, FL 33919 US

Title: VP  
Name: SCHMIDT, BRIAN  
Address: 8695 COLLEGE PARKWAY # 2262  
City-St-Zip: FORT MYERS, FL 33919 US

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: CATHERINE A NOVAK

PRES

02/08/2011

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

\_\_\_\_\_  
Date