

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001882

FILED  
May 19, 2010  
Secretary of State

Entity Name: A G BELL FLORIDA, INC.

**Current Principal Place of Business:**

3603 WEST OKLAHOMA AVE  
TAMPA, FL 33611

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 533035  
ORLANDO, FL 328533035

**New Mailing Address:**

FEI Number: 59-3711758      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

ROSE, MARCUS  
3603 WEST OKLAHOMA AVE  
TAMPA, FL 33611      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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: TENENBORUM, IVY  
Address: 189 NW 113 WAY  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: T  
Name: ROSE, MARCUS  
Address: 3603 WEST OKLAHOMA AVE  
City-St-Zip: TAMPA, FL 33611

Title: P  
Name: FILLOON, DENNIS  
Address: 11457 BLACK LAKE RD.  
City-St-Zip: TALLAHASSEE, FL 32317

Title: S  
Name: HORVATH, JUDY  
Address: 22806 RODERICK DRIVE  
City-St-Zip: LAND 'O LAKES, FL 34639

Title: VP  
Name: MISKIEL, LYNN  
Address: 5841 SW 51 TERRACE  
City-St-Zip: MIAMI, FL 33155

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARCUS W ROSE

T

05/19/2010

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

\_\_\_\_\_  
Date