

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000019433

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** PERRY PARTNERS INCORPORATED

**Current Principal Place of Business:**

4505 48TH AVE  
VERO BEACH, FL 32967

**New Principal Place of Business:**

**Current Mailing Address:**

4505 48TH AVE  
VERO BEACH, FL 32967

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

PERRY, AUNDREA  
4615 43RD COURT  
VERO BEACH, FL 32967      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:** SEC  
**Name:** PERRY, CHANELLE  
**Address:** 4615 43RD COURT  
**City-St-Zip:** VERO BEACH, FL 32967

**Title:** PRES  
**Name:** PERRY, ANGELIA  
**Address:** 4505 4TH AVENUE  
**City-St-Zip:** VERO BEACH, FL 32967

**Title:** VP  
**Name:** PERRY, SCOTT  
**Address:** 4615 43RD COURT  
**City-St-Zip:** VERO BEACH, FL 32967

**Title:** TREA  
**Name:** PERRY, AUNDREA  
**Address:** 4615 43RD COURT  
**City-St-Zip:** VERO BEACH, FL 32967

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:** AUNDREA PERRY

VP

04/29/2010

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

\_\_\_\_\_  
Date