

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000039989

Entity Name: MICHELE J. GALESKI INC.

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3219 W. DELEON #B  
TAMPA, FL 33609

**New Principal Place of Business:**

3219 W. DELEON  
B  
TAMPA, FL 33609

**Current Mailing Address:**

3219 W. DELEON #B  
TAMPA, FL 33609

**New Mailing Address:**

3219 W. DELEON  
B  
TAMPA, FL 33609

FEI Number: 59-3648434

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CAMPBELL, DENNIS J  
16317 E. COURSE DR.  
TAMPA, FL 33624 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: D  
Name: COBURN, MICHELE  
Address: 3219 W. DELEON #B  
City-St-Zip: TAMPA, FL 33609 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: MICHELE COBURN

D

04/20/2011

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

\_\_\_\_\_  
Date