

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000048550

**FILED**  
**Mar 26, 2010**  
**Secretary of State**

**Entity Name:** KATHY CONTI AGENCY, INC.

**Current Principal Place of Business:**

2401 W SAU GALLIE BLVD.  
MELBOURNE, FL 32935

**New Principal Place of Business:**

2401 W EAU GALLIE BLVD.  
#3  
MELBOURNE, FL 32935

**Current Mailing Address:**

2401 W SAU GALLIE BLVD.  
MELBOURNE, FL 32935

**New Mailing Address:**

2401 W EAU GALLIE BLVD.  
#3  
MELBOURNE, FL 32935

**FEI Number:** 59-3643563

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMAS P. FLAVIN, CPA  
330 5TH AVE.  
INDIALANTIC, FL 32903 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: P  
Name: CONTI, KATHLEEN F  
Address: 5965 NEWBURY CIRCLE  
City-St-Zip: MELBOURNE, FL 32940

Title: VP  
Name: CONTI, RONALD J  
Address: 5965 NEWBURY CIRCLE  
City-St-Zip: MELBOURNE, FL 32940

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: KATHLEEN F CONTI

PRES

03/26/2010

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

\_\_\_\_\_ Date