# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 18, 2009**
**Secretary of State**

DOCUMENT# P00000095402

**Entity Name:** CRAIG EPIFANIO, P.A.

**Current Principal Place of Business:**

5445 16TH STREET N.
SAINT PETERSBURG, FL 33703

**New Principal Place of Business:**

**Current Mailing Address:**

5445 16TH STREET N.
SAINT PETERSBURG, FL 33703

**New Mailing Address:**

**FEI Number: 59-3675215** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

EPIFANIO, CRAIG
5445 16TH STREET N.
SAINT PETERSBURG, FL 33703 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: PRES ( ) Delete
Name: EPIFANIO, CRAIG
Address: 5445 16TH STREET N.
City-St-Zip: SAINT PETERSBURG, FL 33703

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CRAIG EPIFANIO PRES 02/18/2009

Electronic Signature of Signing Officer or Director Date