## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000005217

Entity Name: ROPELLA AND ASSOCIATES, INC

FILED Apr 28, 2009 Secretary of State

| Entity Na                                     | Me: ROPELL   | A AND ASSOCIATES, INC.   |   |  |  |
|---|--|--|---|--|--|
| Current P                                     | rincipal Plac                                      | e of Business:   | New Principal Place                         | New Principal Place of Business:             |  |
| 6480 HWY<br>SUITES A<br>MILTON, F             | &B   |  | 8100 OPPOPRTUNIT<br>MILTON, FL 32583        | 8100 OPPOPRTUNITY DRIVE<br>MILTON, FL 32583  |  |
| Current N                                     | lailing Addre                                      | ss:  | New Mailing Addres                          | New Mailing Address:                         |  |
| 6480 HWY<br>SUITE B<br>MILTON, F              |  |  | 8100 OPPORTUNITY<br>MILTON, FL 32583        | DRIVE  |  |
| FEI Number                                    | : 59-3691932                                       | FEI Number Applied For ( )                                       | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent: |  |  | Name and Address of New Registered Agent:   |  |  |
| 7542 LAKE<br>MILTON, F<br>The above           |  |  | purpose of changing its registere           | ed office or registered agent, or both,      |  |
| SIGNATUI                                      |  | . 0  |   |  |  |
| Election Car                                  |  | nic Signature of Registered A<br>ng Trust Fund Contribution ( ). | gent  | Date   |  |
| OFFICERS AND DIRECTORS:                       |  |  | ADDITIONS/CHANG                             | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | D (<br>ROPELLA, PA<br>7542 LAKESII<br>MILTON, FL 3 | DE DRIVE   | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | V (<br>ROPELLA, RC<br>7542 LAKESII<br>MILTON, FL 3 | DE DRIVE   | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |

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: PATRICK B. ROPELLA PRES 04/28/2009