

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000052104

FILED
Apr 13, 2009
Secretary of State

Entity Name: GAULIN, GAULIN, GAULIN, & LAZORE-KHANATARONK P.A.

Current Principal Place of Business:

623 E. ATLANTIC BLVD.
6013
POMPANO BEACH, FL 33064

Current Mailing Address:

2637 E ATLANTIC BLVD 119
POMPANO BEACH, FL 33062 US

New Principal Place of Business:

2637 E. ATLANTIC BLVD.
119
POMPANO BEACH, FL 33062

New Mailing Address:

2637 E ATLANTIC BLVD
119
POMPANO BEACH, FL 33062 US

FEI Number: 65-1103011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GAULIN, DIANE
2637 E ATLANTIC BLVD #119
6233
POMPANO BEACH, FL 33062 US

Name and Address of New Registered Agent:

GAULIN, LYNN
2637 E ATLANTIC BLVD #119
6233
POMPANO BEACH, FL 33062 US

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: LYNN GAULIN

04/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GAULIN, PIERRE
Address: 2637 ATLANTIC BLVD #119
City-St-Zip: POMPANO BEACH, FL 33062

Title: P () Delete
Name: GAULIN, LYNN
Address: BOX 321
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: LYNN GAULIN

D

04/13/2009

Electronic Signature of Signing Officer or Director

Date