# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 24, 2009**
**Secretary of State**

DOCUMENT# P01000054014

**Entity Name:** LAWRENCE SCHARFMAN C.P.A., P.A.

**Current Principal Place of Business:**

9608 HONEYBELLCIRCLE
BOYNTON BEACH, FL 33437

**New Principal Place of Business:**

7104 CORNING CIRCLE
BOYNTON BEACH, FL 33437

**Current Mailing Address:**

7104 CORNING CIRCLE
BOYNTON BEACH, FL 33437

**New Mailing Address:**

**FEI Number: 13-3144934** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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: PSTD ( ) Delete
Name: SCHARFMAN, LAWRENCE
Address: 7104 CORNING CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437 US

**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: LAWRENCE SCHARFMAN PRES 04/24/2009

Electronic Signature of Signing Officer or Director Date