

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000108764

Entity Name: ROSSLER, INC.

FILED
Jan 03, 2006
Secretary of State

Current Principal Place of Business:

2431 ALOMA AVENUE
WINTER PARK, FL 32792

New Principal Place of Business:

2431 ALOMA AVENUE
SUITE 129
WINTER PARK, FL 32792

Current Mailing Address:

3676 BECONTREE PLACE
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 04-3612689

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSSLER, VICKI
3676 BECONTREE PLACE
OVIEDO, FL 32765 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: PD () Delete
Name: ROSSLER, VICKI
Address: 3676 BECONTREE PLACE
City-St-Zip: OVIEDO, FL 32765

Title: VP () Delete
Name: DISTEFANO, BRIE
Address: 3676 BECONTREE PLACE
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: SHIFLETT, BRIE
Address: 3676 BECONTREE PLACE
City-St-Zip: OVIEDO, FL 32765

I hereby certify that the information supplied with this filing does not qualify for the 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: VICKI ROSSLER

PRES

01/03/2006

Electronic Signature of Signing Officer or Director

Date