

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000015436

**FILED**  
**Feb 04, 2010**  
**Secretary of State**

**Entity Name:** APFS & CPAS INC.

**Current Principal Place of Business:**

22 E. STORY RD  
WINTER GARDEN, FL 34787 US

**New Principal Place of Business:**

22 E STORY RD  
WINTER GARDEN, FL 34787 US

**Current Mailing Address:**

22 E. STORY RD  
WINTER GARDEN, FL 34787 US

**New Mailing Address:**

22 E STORY RD  
WINTER GARDEN, FL 34787 US

**FEI Number:** 04-3695661

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BELLO, LUIS G  
1013 VIA TIVOLI CT  
WINDERMERE, FL 34786 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: P  
Name: BELLO, LUIS G  
Address: 1013 VIA TIVOLI CT  
City-St-Zip: WINDERMERE, FL 34786 US

Title: VP  
Name: BELLO, NANCY  
Address: 1013 VIA TIVOLI CT  
City-St-Zip: WINDERMERE, FL 34787 US

I hereby 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 all other like empowered.

SIGNATURE: LUIS G BELLO

P

02/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date