

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000085783

Entity Name: PATRICIA SCIARRINO, P.A.

FILED  
Jan 05, 2007  
Secretary of State

## Current Principal Place of Business:

900 EAST OCEAN BLVD. SUITE 130D  
STUART, FL 34994

## Current Mailing Address:

900 EAST OCEAN BLVD. SUITE 130D  
STUART, FL 34994

## New Principal Place of Business:

900 EAST OCEAN BLVD.  
SUITE 130D  
STUART, FL 34994

## New Mailing Address:

900 EAST OCEAN BLVD.  
SUITE 130D  
STUART, FL 34994

FEI Number: 56-2285303

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCIARRINO, PATRICIA PD  
900 EAST OCEAN BLVD. SUITE 130D  
STUART, FL 34994 US

## Name and Address of New Registered Agent:

SCIARRINO, PATRICIA PD  
900 EAST OCEAN BLVD.  
SUITE 130D  
STUART, FL 34994 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:

Electronic Signature of Registered Agent

01/05/2007

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SCIARRINO, PATRICIA  
Address: 300 COLORADO AVENUE, SUITE #208  
City-St-Zip: STUART, FL 34994

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SCIARRINO, PATRICIA  
Address: 900 EAST OCEAN BLVD., SUITE 130D  
City-St-Zip: STUART, FL 34994

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: PATRICIA SCIARRINO

PD

01/05/2007

Electronic Signature of Signing Officer or Director

Date