

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000003709

FILED
Jan 11, 2010
Secretary of State

Entity Name: DONALD B. LINSKY & ASSOCIATES, P.A.

Current Principal Place of Business:

1509 SUN CITY CENTER PLAZA, SUITE B
SUN CITY CENTER, FL 33573 53

New Principal Place of Business:

Current Mailing Address:

1509 SUN CITY CENTER PLAZA, SUITE B
SUN CITY CENTER, FL 33573

New Mailing Address:

FEI Number: 55-0816604

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINSKY, DONALD B
1509 SUN CITY CENTER PLAZA, SUITE B
SUN CITY CENTER, FL 33573 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: LINSKY, DONALD B
Address: 1509-B SUN CITY CENTER PLAZA
City-St-Zip: SUN CITY CENTER, FL 33573

Title: VP1
Name: LINSKY, JESSICA R
Address: 1509B SUN CITY CENTER PLAZA
City-St-Zip: SUN CITY CENTER, FL 33573

Title: VP2
Name: BOBER, JESSICA M
Address: 1509B SUN CITY CENTER PLAZA
City-St-Zip: SUN CITY CENTER, FL 33573

Title: T1
Name: LINSKY, JESSICA R
Address: 1509B SUN CITY CENTER PLAZA
City-St-Zip: SUN CITY CENTER, FL 33573

Title: T2
Name: BOBER, JESSICA M
Address: 1509B SUN CITY CENTER PLAZA
City-St-Zip: SUN CITY CENTER, FL 33573

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: DONALD B. LINSKY

P

01/11/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date