

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 18, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # P03000032354

1. Entity Name  
PHYLLIS ROTHMAN, P.A.



Principal Place of Business  
7070 PLACIDA RD., #1220  
PLACIDA, FL 33946

Mailing Address  
7070 PLACIDA RD., #1220  
PLACIDA, FL 33946



01132008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
33-1048393

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

ROTHMAN, PHYLLIS  
7070 PLACIDA RD., #1220  
PLACIDA, FL 33946

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE Phyllis Rothman  
Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE 1/14/08

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

U00000789127  
01/22/08-80013-004 150.00

**10. OFFICERS AND DIRECTORS**

TITLE PD  
NAME ROTHMAN, PHYLLIS  
STREET ADDRESS 7070 PLACIDA RD., #1220  
CITY-ST-ZIP PLACIDA, FL 33946

TITLE  
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CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Phyllis Rothman  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/14/08 727-367-5450