

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000060971

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** PENLAND & POMERENKE, INC.

**Current Principal Place of Business:**

307 DIVISION AVENUE  
ORMOND BCH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

307 DIVISION AVENUE  
ORMOND BCH, FL 32174

**New Mailing Address:**

**FEI Number:** 20-0068548

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PENLAND, MELISSA  
307 DIVISION AVE  
ORMOND BEACH, FL 32178 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: PENLAND, MELISSA  
Address: 307 DIVISION AVENUE  
City-St-Zip: ORMOND BCH, FL 32174

Title: D  
Name: POMERENKE, ROBERT  
Address: 307 DIVISION AVENUE  
City-St-Zip: ORMOND BCH, FL 32174

Title: T  
Name: LIPSEY, IRENE  
Address: 307 DIVISION AVE  
City-St-Zip: ORMOND BEACH, FL 32174

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: MELISSA PENLAND

D

02/17/2011

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

\_\_\_\_\_  
Date