

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000089348

Entity Name: GARY ROBINSON, INC.

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

399 N. CYPRESS DRIVE  
TEQUESTA, FL 33469

**New Principal Place of Business:**

**Current Mailing Address:**

399 N. CYPRESS DRIVE  
TEQUESTA, FL 33469

**New Mailing Address:**

FEI Number: 81-0628106

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BOURASSA, JOHN H  
399 N CYPRESS DRIVE  
TEQUESTA, FL 33469 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: PD  
Name: HANSEN, RANDOLPH  
Address: 9 DUNBAR RD  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VDT  
Name: BOURASSA, JOHN H  
Address: 285 SOUTH BEACH RD.  
City-St-Zip: HOBE SOUND, FL 33455

Title: VSD  
Name: BOURASSA, ANDRE R  
Address: 206 ANHINGA LANE  
City-St-Zip: JUPITER, FL 33458

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: RANDOLPH HANSEN

PD

04/25/2011

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

\_\_\_\_\_  
Date