

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000107312

FILED  
Apr 22, 2009  
Secretary of State

**Entity Name:** GABLES REALTY & INVESTMENT CORP.

**Current Principal Place of Business:**

12255 SW 55 ST  
SUITE 811  
COOPER CITY, FL 33330 US

**New Principal Place of Business:**

1495 NORTH PARK DRIVE  
WESTON, FL 33326 US

**Current Mailing Address:**

12850 HUNTERS POINT  
SW RANCHES, FL 33330 US

**New Mailing Address:**

**FEI Number:** 56-2400553      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

POFFENBARGER, MARK A  
12850 HUNTERS POINT  
FORT LAUDERDALE, FL 33330 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,S ( ) Delete  
**Name:** POFFENBARGER, MARK A  
**Address:** 12850 HUNTERS POINT  
**City-St-Zip:** SOUTHWEST RANCHES, FL 33330 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify 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:** MARK POFFENBARGER

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

MR.

04/22/2009

\_\_\_\_\_  
Date