

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000110430

**FILED**  
**May 02, 2011**  
**Secretary of State**

**Entity Name:** CRAIG E. GUNDERSON, P.A.

**Current Principal Place of Business:**

3620 SW 2ND STREET  
CAPE CORAL, FL 33991

**New Principal Place of Business:**

3417 SW 7TH LANE  
CAPE CORAL, FL 33991

**Current Mailing Address:**

3620 SW 2ND STREET  
CAPE CORAL, FL 33991

**New Mailing Address:**

3417 SW 7TH LANE  
CAPE CORAL, FL 33991

**FEI Number:** 20-0320519

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GUNDERSON, MIKO P  
C/O MCKINLEY ITTERSAGEN GUNDERSON ET AL.  
18401 MURDOCK CIRCLE  
PORT CHARLOTTE, FL 339481088 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: GUNDERSON, CRAIG E  
Address: 3620 SW 2ND STREET  
City-St-Zip: CAPE CORAL, FL 33991

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: CRAIG E GUNDERSON

PRES

05/02/2011

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

\_\_\_\_\_  
Date