

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000088509

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: PUNTA GORDA MANAGEMENT, INC.

**Current Principal Place of Business:**

4300 MARSH LANDING BLVD  
SUITE 202  
JACKSONVILLE BEACH, FL 32250 US

**New Principal Place of Business:**

**Current Mailing Address:**

4300 MARSH LANDING BLVD  
SUITE 202  
JACKSONVILLE BEACH, FL 32250 US

**New Mailing Address:**

FEI Number: 34-2001273      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HATHAWAY & REYNOLDS  
115 PROFESSIONAL DRIVE  
SUITE 101  
PONTE VEDRA BEACH, FL 32082 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: DP ( ) Delete  
Name: BOVE, GABRIEL M  
Address: 4300 MARSH LANDING BLVD SUITE 202  
City-St-Zip: JACKSONVILLE, FL 32082 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: GABRIEL BOVE

DP

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date