

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000015911

Entity Name: LILLIAN A GORRIN INC

**FILED**  
**Mar 21, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

7029 FRNACISCO BEND DRIVE  
DELRAY BEACH, FL 33446 US

**New Principal Place of Business:**

**Current Mailing Address:**

7029 FRNACISCO BEND DRIVE  
DELRAY BEACH, FL 33446 US

**New Mailing Address:**

FEI Number: 20-2247628

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HIRSCH AND COMPANY CPAS INC  
175 W CAMINO REAL  
BOCA RATON, FL 33432 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: P  
Name: GORRIN, LILLIAN  
Address: 7029 FRANCISCO BEND DRIVE  
City-St-Zip: DELRAY BEACH, FL 33446

Title: ST  
Name: LISA GORRIN  
Address: 7029 FRNACISCO BEND DR  
City-St-Zip: DELRAY BEACH, FL 33446

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: LILLIAN GORRIN

PRES

03/21/2011

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

\_\_\_\_\_  
Date