

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000058399

FILED
Apr 05, 2011
Secretary of State

Entity Name: KATHLEEN MANFREDI, P.A.

Current Principal Place of Business:

12008 SOUTH SHORE BLVD.
SUITE 101
WELLINGTON, FL 33414

New Principal Place of Business:

12008 SOUTH SHORE BLVD.
SUITE 201
WELLINGTON, FL 33414

Current Mailing Address:

12008 SOUTH SHORE BLVD.
SUITE 101
WELLINGTON, FL 33414

New Mailing Address:

12008 SOUTH SHORE BLVD.
SUITE 201
WELLINGTON, FL 33414

FEI Number: 20-2710283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANFREDI, KATHLEEN
6446 DUCKWEED ROAD
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

MANFREDI, KATHLEEN
6446 DUCKWEED ROAD
LAKE WORTH, FL 33449 US

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: KATHLEEN MANFREDI

04/05/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: MANFREDI, KATHLEEN
Address: 6446 DUCKWEED ROAD
City-St-Zip: LAKE WORTH, FL 33449

Title: VP
Name: MANFREDI, KATHLEEN
Address: 6446 DUCKWEED ROAD
City-St-Zip: LAKE WORTH, FL 33449

Title: SEC
Name: MANFREDI, KATHLEEN
Address: 6446 DUCKWEED ROAD
City-St-Zip: LAKE WORTH, FL 33449

Title: T
Name: MANFREDI, KATHLEEN
Address: 6446 DUCKWEED ROAD
City-St-Zip: WELLINGTON, FL 33449

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: KATHLEEN MANFREDI

PRES

04/05/2011

Electronic Signature of Signing Officer or Director

Date