

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000061137

Entity Name: MONICA QUINN PA

FILED  
Jul 15, 2009  
Secretary of State

## Current Principal Place of Business:

% MONICA QUINN  
1810 SW GEMINI LN  
PORT ST LUCIE, FL 34984

## Current Mailing Address:

% MONICA QUINN  
1810 SW GEMINI LN  
PORT ST LUCIE, FL 34984

## New Principal Place of Business:

% MONICA QUINN  
5951 OVERSEAS HWY  
MARATHON, FL 33050 US

## New Mailing Address:

% MONICA QUINN  
5951 OVERSEAS HWY  
MARATHON, FL 33050 US

FEI Number: 20-2696112

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

QUINN, MONICA  
1810 SW GEMINI LN  
PORT ST LUCIE, FL 34984 US

## Name and Address of New Registered Agent:

QUINN, MONICA  
5951 OVERSEAS HWY  
MARATHON, FL 33050 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: MONICA QUINN

07/15/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: QUINN, MONICA  
Address: 1810 SW GEMINI LN  
City-St-Zip: PORT ST LUCIE, FL 34984

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: QUINN, MONICA  
Address: 33050 OVERSEAS HWY  
City-St-Zip: MAQRATHON, FL 33050 US

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: MONICA QUINN

P

07/15/2009

Electronic Signature of Signing Officer or Director

Date