

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000092311

Entity Name: GIFFORD GROUP, INC.

**FILED**  
**Jan 28, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

24600 S TAMIAMI TR STE 208  
BONITA SPRINGS, FL 34134

## **New Principal Place of Business:**

24830 S TAMIAMI TRAIL  
SUITE 1800  
BONITA SPRINGS, FL 34134

## **Current Mailing Address:**

24600 S TAMIAMI TR STE 208  
BONITA SPRINGS, FL 34134

## **New Mailing Address:**

24830 S TAMIAMI TRAIL  
SUITE 1800  
BONITA SPRINGS, FL 34134

FEI Number: 20-3062764

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HAZEN, PATRICIA  
26460 DOVERSTONE STREET  
BONITA SPRINGS, FL 34135 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: MRS.  
Name: HAZEN, PATRICIA A PRES  
Address: 26460 DOVERSTONE STREET  
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: MR.  
Name: HAZEN, JACK V PRES  
Address: 26460 DOVERSTONE STREET  
City-St-Zip: BONITA SPRINGS, FL 34135 US

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: PATRICIA A HAZEN

PRES

01/28/2011

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

\_\_\_\_\_  
Date