

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000105998

Entity Name: CELINE S. GOGET, P.A.

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

940 3RD STREET SOUTH
202
NAPLES, FL 34102

Current Mailing Address:

940 3RD STREET SOUTH
202
NAPLES, FL 34102

FEI Number: 20-3221120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

1300 GULF SHORE BLVD
407
NAPLES, FL 34102

New Mailing Address:

1300 GULF SHORE BLVD
407
NAPLES, FL 34102

Name and Address of Current Registered Agent:

HUDGINS, THOMAS F
801 12TH AVE S SUITE 200
NAPLES, FL 34102 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: GOGET, CELINE S
Address: 940 3RD STREET SOUTH #202
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GOGET, CELINE S
Address: 1300 GULF SHORE BLVD #407
City-St-Zip: NAPLES, FL 34102

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: CELINE GOGET

DP

04/16/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date