

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000106791

FILED  
Jan 17, 2011  
Secretary of State

**Entity Name:** KOSENE & KOSENE RESIDENTIAL FLORIDA, INC.

**Current Principal Place of Business:**

530 EAST OHIO STREET  
202  
INDIANAPOLIS, IN 46204

**New Principal Place of Business:**

11350 N. MERIDIAN STREET  
100  
CARMEL, IN 46032

**Current Mailing Address:**

530 EAST OHIO STREET  
202  
INDIANAPOLIS, IN 46204

**New Mailing Address:**

11350 N. MERIDIAN STREET  
100  
CARMEL, IN 46032

**FEI Number:** 20-3232676

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324 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: DP  
Name: KOSENE, DAVID H  
Address: 11350 N. MERIDIAN STE. 100  
City-St-Zip: CARMEL, IN 46032

Title: DV  
Name: KOSENE, GERALD A  
Address: 11350 N. MERIDIAN ST., STE. 100  
City-St-Zip: CARMEL, IN 46032

Title: DT  
Name: GUINN, ANGELA C  
Address: 11350 N. MERIDIAN STE. 100  
City-St-Zip: CARMEL, IN 46032

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: DAVID H. KOSENE

PD

01/17/2011

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

\_\_\_\_\_  
Date