

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000128903

**FILED**  
**Apr 28, 2009**  
**Secretary of State**

**Entity Name:** DEBRA GOLAN, P.A.

**Current Principal Place of Business:**

EWM REALTORS  
2775 NE 185TH STREET SUITE 101  
AVENTURA, FL 33180

**New Principal Place of Business:**

KELLER WILLIAMS  
700 NE 90TH STREET  
MIAMI, FL 33138

**Current Mailing Address:**

EWM REALTORS  
2775 NE 185TH STREET SUITE 101  
AVENTURA, FL 33180

**New Mailing Address:**

19707 TURNBERRY WAY  
STE 18K  
AVENTURA, FL 33180

**FEI Number:** 20-3515858

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOLAN, DEBRA M  
19707 TURNBERRY WAY SUITE 18K  
AVENTURA, FL 33180 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: MRS. ( ) Delete  
Name: GOLAN, DEBRA  
Address: 275 NE 185TH STREET SUITE 101  
City-St-Zip: AVENTURA, FL 33180

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: MRS. (X) Change ( ) Addition  
Name: GOLAN, DEBRA  
Address: 19707 TURNBERRY WAY STE 18K  
City-St-Zip: AVENTURA, FL 33180

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: DEBRA GOLAN

MRS

04/28/2009

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

\_\_\_\_\_  
Date