

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000133370

**FILED**  
**Mar 26, 2010**  
**Secretary of State**

**Entity Name:** SALLY FRIZZELL COLEMAN, CPA, PA

**Current Principal Place of Business:**

2283 MAIN ST  
FT. MYERS, FL 33901

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2620  
FT. MYERS, FL 33902

**New Mailing Address:**

**FEI Number:** 20-3552762

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRIZZELL COLEMAN, SALLY  
2077 FIRST ST., STE. 209  
FT. MYERS, FL 33901 US

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

FRIZZELL COLEMAN, SALLY  
2283 MAIN STREET  
FT. MYERS, FL 33901 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:

03/26/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DPTS  
Name: FRIZZELL COLEMAN, SALLY  
Address: 2283 MAIN STREET  
City-St-Zip: FT. MYERS, FL 33901

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: SALLY FRIZZELL COLEMAN

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03/26/2010

Electronic Signature of Signing Officer or Director

Date