

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000008030

Entity Name: ANA C. ZIEGLER, PA

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

2328 HANCOCK BRIDGE PKWY
SUITE 112B
CAPE CORAL, FL 33990 US

Current Mailing Address:

2328 HANCOCK BRIDGE PKWY
SUITE 112B
CAPE CORAL, FL 33990 US

New Principal Place of Business:

2328 HANCOCK BRIDGE PKWY
SUITE 111
CAPE CORAL, FL 33990 US

New Mailing Address:

2328 HANCOCK BRIDGE PKWY
SUITE 111
CAPE CORAL, FL 33990 US

FEI Number: 20-4153997

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BILINGUAL THERAPY CENTER
2328 HANCOCK BRIDGE PARKWAY
SUITE 112B
CAPE CORAL, FL 33990 US

Name and Address of New Registered Agent:

BILINGUAL THERAPY CENTER
2328 HANCOCK BRIDGE PARKWAY
SUITE 111
CAPE CORAL, FL 33990 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: ANA C. ZIEGLER

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVP () Delete
Name: ZIEGLER, ANA C
Address: 1871 CORAL CIRCLE
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: S/TR () Delete
Name: ZIEGLER, ANA C
Address: 1871 CORAL CIRCLE
City-St-Zip: NORTH FORT MYERS, FL 33903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANA ZIEGLER

MRS

04/30/2009

Electronic Signature of Signing Officer or Director

Date