

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000032371

**FILED**  
**Mar 05, 2010**  
**Secretary of State**

**Entity Name:** CAROLINE APPIS, ATTORNEY AT LAW, P.A.

**Current Principal Place of Business:**

5955 SE FEDERAL HWY  
SUITE 65  
STUART, FL 34997

**New Principal Place of Business:**

**Current Mailing Address:**

5955 SE FEDERAL HWY  
SUITE 65  
STUART, FL 34997

**New Mailing Address:**

8526 SW SEA CAPTAIN DR.  
STUART, FL 34997

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

TRITTIPO, THOMAS  
8526 SW SEA CAPTAIN DR  
STUART, FL 34997    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: D  
Name: BEDLEY, PATRICIA  
Address: 3130 NE 43RD ST  
City-St-Zip: FT LAUDERDALE, FL 33308

Title: D  
Name: CORNABY, JACQUELINE  
Address: 4436 FOREST BEND BLVD.  
City-St-Zip: DALLAS, TX 75244

Title: D  
Name: TRITTIPO, NICOLE  
Address: 616 NE 16 AVE, APT. 2  
City-St-Zip: FT LAUDERDALE, FL 33304

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: THOMAS TRITTIPO

RA

03/05/2010

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

\_\_\_\_\_ Date