

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000077109

Entity Name: C. GORDON'S & ASSOCIATES, INC.

FILED  
Jan 24, 2007  
Secretary of State

## Current Principal Place of Business:

11419 WHISPERING HOLLOW DRIVE  
TAMPA, FL 33635

## New Principal Place of Business:

5404 HOOVER DR  
3  
TAMPA, FL 33615

## Current Mailing Address:

11419 WHISPERING HOLLOW DRIVE  
TAMPA, FL 33635

## New Mailing Address:

FEI Number: 27-0144634      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GORDON, CHRISTOPHER  
11419 WHISPERING HOLLOW DRIVE  
TAMPA, FL 33635      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 ( ) Delete  
Name: GORDON, CHRISTOPHER D  
Address: 11419 WHISPERING HOLLOW DRIVE  
City-St-Zip: TAMPA, FL 33635

Title: D ( ) Delete  
Name: GORDON, CHRISTOPHER D JR.  
Address: 11419 WHISPERING HOLLOW DRIVE  
City-St-Zip: TAMPA, FL 33635

Title: D ( ) Delete  
Name: GORDON, LEONOR  
Address: 11419 WHISPERING HOLLOW DRIVE  
City-St-Zip: TAMPA, FL 33635

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: CHRISITOPHER GORDON

PRES

01/24/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date