

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000092077

FILED
Jan 23, 2009
Secretary of State

Entity Name: SCULLIN & SOBELMAN, P.A.

Current Principal Place of Business:

1250 TAMIAMI TRAIL NORTH
211
NAPLES, FL 34102

New Principal Place of Business:

1250 TAMIAMI TRAIL NORTH
302
NAPLES, FL 34102

Current Mailing Address:

1250 TAMIAMI TRAIL NORTH
211
NAPLES, FL 34102

New Mailing Address:

1250 TAMIAMI TRAIL NORTH
302
NAPLES, FL 34102

FEI Number: 20-5088171

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCULLIN, JAMES J
5064 JARVIS LANE
NAPLES, FL 34119 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: PRES () Delete
Name: SCULLIN, JAMES J PRES
Address: 5064 JARVIS LANE
City-St-Zip: NAPLES, FL 34119

Title: TREA () Delete
Name: SOBELMAN, JERRY S TREA
Address: 1301 EGRETS LANDING #101
City-St-Zip: NAPLES, FL 34108

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: JAMES J SCULLIN

PRES

01/23/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date