

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000105250

FILED  
Jul 31, 2009  
Secretary of State

Entity Name: ROSEWELL'S ENTERPRISE, INC

## Current Principal Place of Business:

4166 INVERRARY DRIVE  
APT 208  
LAUDERHILL, FL 33319 US

## New Principal Place of Business:

5503 MULBERRY DRIVE  
TAMARAC, FL 33319 US

## Current Mailing Address:

5503 MULBERRY DRIVE  
TAMARAC, FL 33319 US

## New Mailing Address:

FEI Number: 20-5366575      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PITTER, CARL S  
7435 NORTH WEST 57TH STREET  
TAMARAC, FL 33319 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: ROSEWELL, FITZROY  
Address: 5503 MULBERRY DRIVE  
City-St-Zip: TAMARAC, FL 33319 US

Title: VP ( ) Delete  
Name: CAMPBELL, SASHA  
Address: 5503 MULBERRY DRIVE  
City-St-Zip: TAMARAC, FL 33319 US

Title: SEC ( ) Delete  
Name: CAMPBELL, SASHA  
Address: 5503 MULBERRY DRIVE  
City-St-Zip: TAMARAC, FL 33319 US

Title: TREA ( ) Delete  
Name: CAMPBELL, SASHA  
Address: 5503 MULBERRY DRIVE  
City-St-Zip: TAMARAC, FL 33319 US

Title: DIR ( ) Delete  
Name: ROSEWELL, FITZROY  
Address: 5503 MULBERRY DRIVE  
City-St-Zip: TAMARAC, FL 33319 US

## 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:

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: SASHA CAMPBELL

VP

07/31/2009

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

\_\_\_\_\_  
Date