

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000055020

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** LAW OFFICE OF CHARLES SNIFFEN, P.A.

**Current Principal Place of Business:**

417 12TH STREET WEST  
SUITE 205  
BRADENTON, FL 34205

**New Principal Place of Business:**

**Current Mailing Address:**

417 12TH STREET WEST  
SUITE 205  
BRADENTON, FL 34205

**New Mailing Address:**

**FEI Number:** 26-0157614

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SNIFFEN, CHARLES  
417 12TH STREET WEST  
SUITE 205  
BRADENTON, FL 34205 US

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

SNIFFEN, CHARLES  
1206 MANATEE AVENUE WEST  
BRADENTON, FL 34205 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

04/20/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: SNIFFEN, CHARLES  
Address: 417 12TH STREET WEST, SUITE 205  
City-St-Zip: BRADENTON, FL 34205

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: CHARLES SNIFFEN

D

04/20/2011

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

\_\_\_\_\_  
Date