

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000069500

FILED
Jul 10, 2009
Secretary of State**Entity Name:** ROSSI & COMPANY INC.**Current Principal Place of Business:**200 S. WASHINGTON BLVD.
SUITE 10
SARASOTA, FL 34236**New Principal Place of Business:****Current Mailing Address:**200 S. WASHINGTON BLVD.
SUITE 10
SARASOTA, FL 34236**New Mailing Address:****FEI Number:** 26-0808647**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROMER, EMILY
4744 OLD STONE ROAD
SARASOTA, FL 34233 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**OFFICERS AND DIRECTORS:****Title:** D () Delete
Name: ROSSI, PATRICIA
Address: 145 N. WASHINGTON DRIVE
City-St-Zip: SARASOTA, FL 34236**Title:** PD () Delete
Name: ROMER, EMILY
Address: 4744 OLD STONE RD.
City-St-Zip: SARASOTA, FL 34233**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D () Change (X) Addition
Name: ROSSI, MARK C
Address: 445 W. 61ST TERRACE
City-St-Zip: KANSAS CITY, MO 64113

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: EMILY ROMER

PD

07/10/2009

Electronic Signature of Signing Officer or Director_____
Date