

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000102631

Entity Name: GINA LABARBERA, P. A.

**FILED**  
**Jan 07, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

585 STATE ROAD 13 NORTH  
102  
JACKSONVILLE, FL 32259

## **New Principal Place of Business:**

12276 SAN JOSE BLVD  
730  
JACKSONVILLE, FL 32223

## **Current Mailing Address:**

12129 LAKE FERN DRIVE  
JACKSONVILLE, FL 32258

## **New Mailing Address:**

FEI Number: 26-1100733      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LABARBERA, GINA  
12129 LAKE FERN DRIVE  
JACKSONVILLE, FL 32258      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: P  
Name: LABARBERA, GINA  
Address: 12129 LAKE FERN DRIVE  
City-St-Zip: JACKSONVILLE, FL 32258

Title: VP  
Name: LABARBERA, CHRISTOPHER  
Address: 12129 LAKE FERN DRIVE  
City-St-Zip: JACKSONVILLE, FL 32258

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: GINA LABARBERA

P

01/07/2010

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

\_\_\_\_\_  
Date