

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000027624

FILED
Apr 30, 2009
Secretary of State

Entity Name: MARQUIN S. RINARD, ESQ, PA

Current Principal Place of Business:

416 NW 23RD AVE
CAPE CORAL, FL 33993 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 151088
CAPE CORAL, FL 33915 US

New Mailing Address:

FEI Number: 26-2131814

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RINARD, MARQUIN S
2650 AIRPORT ROAD S.
SUITE H
NAPLES,, FL 34112 US

Name and Address of New Registered Agent:

RINARD, MARQUIN S
416 NW 23RD AVENUE
CAPE CORAL, FL 33993 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:

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RINARD, MARQUIN S
Address: P. O. BOX 151088
City-St-Zip: CAPE CORAL, FL 33915 US

Title: VP () Delete
Name: RINARD, THERESA K
Address: P. O. BOX 151088
City-St-Zip: CAPE CORAL, FL 33915 US

Title: S () Delete
Name: RINARD, THERESA K
Address: P. O. BOX 151088
City-St-Zip: CAPE CORAL, FL 33915 US

Title: T () Delete
Name: RINARD, MARQUIN S
Address: P. O. BOX 151088
City-St-Zip: CAPE CORAL, FL 33915 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:

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: MARQUIN S. RINARD

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date