

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000028026

**FILED**  
**Feb 08, 2011**  
**Secretary of State**

**Entity Name:** THE GABLE LAW FIRM, P.A.

**Current Principal Place of Business:**

783 KNOLLVIEW BLVD.  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

318 SILVER BEACH AVENUE  
DAYTONA BEACH, FL 32118

**Current Mailing Address:**

783 KNOLLVIEW BLVD.  
ORMOND BEACH, FL 32174

**New Mailing Address:**

318 SILVER BEACH AVENUE  
DAYTONA BEACH, FL 32118

FEI Number: 27-2303161

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GABLE, MATTHEW  
783 KNOLLVIEW BLVD.  
ORMOND BEACH, FL 32174 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: P  
Name: GABLE, MATTHEW  
Address: 783 KNOLLVIEW BLVD.  
City-St-Zip: ORMOND BEACH, FL 32174

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: MATTHEW GABLE

P

02/08/2011

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

\_\_\_\_\_ Date