

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30464

FILED  
Feb 24, 2009  
Secretary of State

Entity Name: BRIAN BIVIANO & ASSOCIATES, INC.

## Current Principal Place of Business:

1022 PINE HILLS RD  
ORLANDO, FL 32808 US

## New Principal Place of Business:

526 S. FOREST AVE. SUITE B  
APOPKA, FL 32703 US

## Current Mailing Address:

PO BOX 585460  
ORLANDO, FL 32858 US

## New Mailing Address:

PO BOX 2173  
APOPKA, FL 32704 US

FEI Number: 22-3052123

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BIVIANO, BRIAN  
1022 PINE HILLS RD  
ORLANDO, FL 32808 US

## Name and Address of New Registered Agent:

BIVIANO, BRIAN  
526 S. FOREST AVE. SUITE B  
APOPKA, FL 32703 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:

02/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: BIVIANO, BRIAN,  
Address: 1022 PINE HILLS RD  
City-St-Zip: ORLANDO, FL 32808

Title: V ( ) Delete  
Name: BIVIANO, PAULA  
Address: 1022 PINE HILLS RD  
City-St-Zip: ORLANDO, FL 32808

Title: S ( ) Delete  
Name: BIVIANO, MELISSA  
Address: 1022 PINE HILLS RD.  
City-St-Zip: ORLANDO, FL 32808

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: BIVIANO, BRIAN,  
Address: 526 S. FOREST AVE. SUITE B  
City-St-Zip: APOPKA, FL 32703

Title: V (X) Change ( ) Addition  
Name: BIVIANO, PAULA  
Address: 526 S. FOREST AVE. SUITE B  
City-St-Zip: APOPKA, FL 32703

Title: S (X) Change ( ) Addition  
Name: BIVIANO, MELISSA  
Address: 526 S. FOREST AVE. SUITE B  
City-St-Zip: APOPKA, FL 32703

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: BRIAN BIVIANO

PTD

02/24/2009

Electronic Signature of Signing Officer or Director

Date