2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2009
Secretary of State

DOCUMENT# P94000010211

Entity Name: KATZMAN GARFINKEL, P.A.

Current Principal Place of Business:

SUITE 202
1501 NORTHWEST 49TH STREET
FT. LAUDERDALE, FL 33309 US

New Principal Place of Business:

1501 NORTHWEST 49TH STREET
SUITE 202
FT. LAUDERDALE, FL 33309 US

Current Mailing Address:

SUITE 202
1501 NORTHWEST 49TH STREET
FT. LAUDERDALE, FL 33309 US

New Mailing Address:

300 N MAITLAND AVE
MAITLAND, FL 32751 US

FEI Number: 65-0468250 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KATZMAN, LEIGH C
1501 N.W. 49TH ST.
SUITE 202
FT. LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

KOLTUN, JEFFREY M
557 N WYMORE RD
SUITE 100
MAITLAND, FL 32751 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: JEFFREY M KOLTUN 04/09/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: KATZMAN, LEIGH C
Address: 1501 NW 49TH STREET SUITE 202
City-St-Zip: FORT LAUDERDALE, FL 33309 US

Title: DVPS ( ) Delete
Name: GARFINKEL, ALAN B
Address: 300 NORTH MAITLAND AVENUE
City-St-Zip: MAITLAND, FL 32751 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ALAN B. GARFINKEL DVPS 04/09/2009
Electronic Signature of Signing Officer or Director Date