2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2009
Secretary of State

DOCUMENT# P94000048283

Entity Name: MARIANNE REISEN, C.P.A., P.A.

Current Principal Place of Business:

6219 14TH AVE S
GULFPORT, FL 33707

New Principal Place of Business:

Current Mailing Address:

6219 14TH AVE S
GULFPORT, FL 33707

New Mailing Address:

FEI Number: 59-3254460 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REISEN, MARIANNE
6219 14TH AVE S
GULFPORT, FL 33707 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: D ( ) Delete
Name: REISEN, MARIANNE
Address: 6219 14TH AVE S
City-St-Zip: GULFPORT, FL 33707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: REISEN, MARIANNE
Address: 6219 14TH AVE S
City-St-Zip: GULFPORT, FL 33707

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: MARIANNE REISEN PRES 02/27/2009
Electronic Signature of Signing Officer or Director Date