

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000055173

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Entity Name:** LINDA KOSMALA, P.A.

**Current Principal Place of Business:**

2363 SE OCEAN BLVD.  
STUART, FL 34996

**New Principal Place of Business:**

**Current Mailing Address:**

8593 SE RETREAT DR  
HOBE SOUND, FL 33455

**New Mailing Address:**

**FEI Number:** 65-0599712

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KOSMALA, LINDA  
2363 SE OCEAN BLVD.  
STUART, FL 34996 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: KOSMALA, LINDA  
Address: 2363 SE OCEAN BLVD.  
City-St-Zip: STUART, FL 34996

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: LINDA KOSMALA

PRES

01/06/2011

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

\_\_\_\_\_  
Date