

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000011296

**FILED**  
**Feb 17, 2010**  
**Secretary of State**

**Entity Name:** DR. BRYAN WEXLER AND ASSOCIATES, P.A.

**Current Principal Place of Business:**

2223 NORTH WESTSHORE BLVD  
SUITE # 293  
TAMPA, FL 33607 US

**New Principal Place of Business:**

**Current Mailing Address:**

11629 BRISTOL CHASE DRIVE  
TAMPA, FL 33626 US

**New Mailing Address:**

**FEI Number:** 59-3425224      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WEXLER, BRYAN  
11629 BRISTOL CHASE DRIVE  
TAMPA, FL 33626 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: P  
Name: WEXLER, BRYAN DR.  
Address: 11629 BRISTOL CHASE DRIVE  
City-St-Zip: TAMPA, FL 33626 US

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: BRYAN WEXLER

PRES

02/17/2010

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

\_\_\_\_\_ Date