2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P97000085717

1. Entity Name
SUSAN E. KOZLOSKI, P.A.

Principal Place of Business	Mailing Address
7041 W. COMMERCIAL BLVD. STE 6A FT LAUDERDALE, FL 33319	1412 NE 57TH ST FT LAUDERDALE, FL 33334

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DO NOT WRITE IN THIS SPACE

04292007   No Chg-P   CR2E034 (11/05)

4. FEI Number		Applied For
65-0784738		Not Applicable

5. Certificate of Status Desired   ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KOZLOSKI, SUSAN E
7041 W. COMMERCIAL BLVD.
STE 6A
FORT LAUDERDALE, FL 33319

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

CFILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution.   ☐   **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DPST
NAME	KOZLOSKI, SUSAN E
STREET ADDRESS	1412 NE 57TH ST
CITY-ST-ZIP	FT LAUDERDALE, FL 33334

TITLE	V
NAME	KOZLOSKI, RONALD
STREET ADDRESS	1412 NE 57 ST
CITY-ST-ZIP	FT. LAUDERDALE, FL 33334

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
NAME	
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CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Susan Kozloski_   4/24/07   954-771-3757

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #