

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000095113

FILED
Mar 25, 2009
Secretary of State

Entity Name: ANTHONY JAQUINTO, P.A.

Current Principal Place of Business:

4175 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 250
CRYSTAL BEACH, FL 34681 US

New Mailing Address:

FEI Number: 59-3561533

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAQUINTO, ANTHONY
35095 US HWY 19 N
SUITE 100
PALM HARBOR, FL 34684 US

Name and Address of New Registered Agent:

JAQUINTO, ANTHONY
4175 WOODLANDS PKWY
PALM HARBOR, FL 34685 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: ANTHONY JAQUINTO

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: JAQUINTO, ANTHONY
Address: P.O.BOX 250
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: DVS () Delete
Name: MARYANNE, JAQUINTO
Address: P O BOX 250
City-St-Zip: CRYSTAL BEACH, FL 34681

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: ANTHONY JAQUINTO

D/O

03/25/2009

Electronic Signature of Signing Officer or Director

Date