2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000014171

Entity Name: GITTA URBAINCZYK, P.A

728 HEATHER GLEN CIRCLE

City-St-Zip: LAKE MARY, FL 32846

Address:

FILED Apr 10, 2007 Secretary of State

Littly Nai	ille. GITTA OI	RDAINCZTN, F.A.				
Current P	rincipal Place	of Business:	New Principal Place of	New Principal Place of Business:		
290 WAYMONT CT LAKE MARY, FL 32746			125 WAYMONT CT #11 LAKE MARY, FL 32746	125 WAYMONT CT #111 LAKE MARY, FL 32746		
Current M	lailing Addres	ss:	New Mailing Address:	New Mailing Address:		
290 WAYN LAKE MAF	MONT CT RY, FL 32746		125 WAYMONT CT #111 LAKE MARY, FL 32746	I		
FEI Number:	: 59-3500822	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()		
Name and	l Address of C	Current Registered Agent:	Name and Address of N	Name and Address of New Registered Agent:		
235 MAITĹ	BERRY J JR AND AVE SO D, FL 32751	STE 216 US	URBAINCZYK, GITTA 125 WAYMONT CT. #11 LAKE MARY, FL 32746	1 US		
	e named entity : e of Florida.	submits this statement for the p	urpose of changing its registered o	office or registered agent, or both,		
SIGNATUR	RE: GITTA UI	RBAINCZYK		04/10/2007		
	Electror	nic Signature of Registered Age	nt	Date		
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS	S AND DIREC	TORS:	ADDITIONS/CHANGES	TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D (URBAINCZYK, 861 EAGLE CL LAKE MARY, F	AW CT.	Title: () Name: Address: City-St-Zip:) Change ()Addition		
Title: Name: Address: City-St-Zip:	D (URBAINCZYK, 861 EAGLE CL LAKE MARY, F	AW CT	Title: () Name: Address: City-St-Zip:) Change ()Addition		
Title: Name:	D ()) Delete AINCZYK	Title: () Name:) Change ()Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

	SIGNATURE: E	RNST URBAINCZYK	VP	04/10/2007
--	--------------	-----------------	----	------------