

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000077127

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: 309 S. 7TH ST., INC.

## Current Principal Place of Business:

261 NE FARING AVE  
PORT ST. LUCIE, FL 34983 US

## New Principal Place of Business:

2602 SW RACQUET CLUB DR  
PALM CITY, FL 34990 US

## Current Mailing Address:

261 NE FARING AVE  
PORT ST. LUCIE, FL 34983 US

## New Mailing Address:

2602 SW RACQUET CLUB DR  
PALM CITY, FL 34990 US

FEI Number: 65-0867568

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PAUSTIAN, ROBERT  
362 NE ARDSLEY  
PORT SAINT LUCIE, FL 34983 US

## Name and Address of New Registered Agent:

GIULIANI, SUSAN  
2602 SW RACQUET CLUB DR  
PALM CITY, FL 34990 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: SUSAN GIULIANI

03/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PAUSTIAN, ROBERT  
Address: 262 NE ARDSLEY  
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: VP ( ) Delete  
Name: NICKSON, STIX  
Address: 261 NE FARING AVE  
City-St-Zip: PORT ST. LUCIE, FL 34983 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PAUSTIAN, ROBERT  
Address: 2602 SW RACQUET CLUB DR  
City-St-Zip: PALM CITY, FL 34990

Title: T (X) Change ( ) Addition  
Name: NICKSON, STIX  
Address: 261 NE FARING AVE  
City-St-Zip: PORT ST. LUCIE, FL 34983 US

Title: VP ( ) Change (X) Addition  
Name: GIULIANI, SUSAN  
Address: 2602 SW RACQUET CLUB DR  
City-St-Zip: PALM CITY, FL 34990

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: SUSAN GIULIANI

VP

03/20/2009

Electronic Signature of Signing Officer or Director

Date