

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000081142

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** GOTTFRIED FINANCIAL GROUP, INC.

**Current Principal Place of Business:**

7413 W NEWBERRY ROAD  
GAINESVILLE, FL 32608

**New Principal Place of Business:**

345 NE 69 CIRCLE  
BOCA RATON, FL 33487

**Current Mailing Address:**

7491 N FEDERAL HWAY  
C5109  
BOCA RATON, FL 33487

**New Mailing Address:**

7491 N FEDERAL HWAY  
C5108  
BOCA RATON, FL 33487

**FEI Number:** 65-0866938

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOTTFRIED, JEFFREY  
7413 W NEWBERRY ROAD  
GAINESVILLE, FL 32608 US

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

GOTTFRIED, JEFFREY  
345 NE 69 CIRCLE  
BOCA RATON, FL 33487 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:** JEFFREY GOTTFRIED

04/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** GOTTFRIED, JEFFREY  
**Address:** 345 NE 69 CIRCLE  
**City-St-Zip:** BOCA RATON, FL 33487

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:** JEFFREY GOTTFRIED

PD

04/29/2011

Electronic Signature of Signing Officer or Director

Date