

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000023357

FILED  
Mar 16, 2010  
Secretary of State

Entity Name: UDELL ASSOCIATES, INC.

## Current Principal Place of Business:

1605 MAIN STREET  
1110  
SARASOTA, FL 34236 US

## New Principal Place of Business:

## Current Mailing Address:

C/O NFP 500 W MADISON ST  
STE 2400  
CHICAGO, IL 60661 US

## New Mailing Address:

FEI Number: 13-4072128      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT  
Name: UDELL, BRUCE  
Address: 1605 MAIN STREET, SUITE 1110  
City-St-Zip: SARASOTA, FL 34236 US

Title: DVPS  
Name: UDELL, JANET S  
Address: 1605 MAIN STREET, SUITE 1110  
City-St-Zip: SARASOTA, FL 34236 US

Title: D  
Name: ZUCCARO, ROBERT  
Address: 407 WEKIVA SPRINGS RD, SUITE 247  
City-St-Zip: LONGWOOD, FL 32779 US

Title: VP  
Name: HINKSON, MALIKA  
Address: 407 WEKIVA SPRINGS RD, SUITE 247  
City-St-Zip: LONGWOOD, FL 32779 US

Title: VP  
Name: LIESER, LORI  
Address: 500 W MADISON , SUITE 2400  
City-St-Zip: CHICAGO, IL 60661

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: JANET UDELL

DVPS

03/16/2010

Electronic Signature of Signing Officer or Director

Date