

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000078856

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** ARZ MANAGEMENT CORPORATION

**Current Principal Place of Business:**

5439 S.E. ACADIA TERR.  
HOBE SOUND, FL 33455

**New Principal Place of Business:**

**Current Mailing Address:**

5439 S.E. ACADIA TERR.  
HOBE SOUND, FL 33455

**New Mailing Address:**

**FEI Number:** 65-0945679

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ZOLLO, ALLEN R  
5439 S.E. ACADIA TERR.  
HOBE SOUND, FL 33455 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:** D  
**Name:** ZOLLO, ALLEN R  
**Address:** 5439 S.E. ACADIA TERR.  
**City-St-Zip:** HOBE SOUND, FL 33455

**Title:** D  
**Name:** ZOLLO, ANNE D  
**Address:** 5439 S. E. ACADIA TERR.  
**City-St-Zip:** HOBE SOUND, FL 33455

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:** ALLEN R ZOLLO

PRES

04/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date