

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000111868

Entity Name: WORONOFF MANAGEMENT, INC.

FILED  
Mar 02, 2009  
Secretary of State

**Current Principal Place of Business:**

200 INDIAN HARBOR DR  
VERO BEACH, FL 32963

**New Principal Place of Business:**

**Current Mailing Address:**

505 BEACHLAND BLVD. STE 1 PMB 158  
PAK MAIL BEACHSIDE  
VERO BEACH, FL 32963

**New Mailing Address:**

FEI Number: 65-0970278      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

VALDES-FAULI CORPORATE SERVICES, INC.  
777 SOUTH FLAGLER DRIVE  
SUITE 500 EAST  
WEST PALM BEACH, FL 33401 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: PT ( ) Delete  
Name: WORONOFF, ROBERT M  
Address: 505 BEACHLAND BLVD PMB 158 STE1  
City-St-Zip: VERO BEACH, FL 329631790

Title: VPS ( ) Delete  
Name: WORONOFF, PATRICIA  
Address: 200 INDIAN HARBOR DR  
City-St-Zip: VERO BEACH, FL 32963

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPS (X) Change ( ) Addition  
Name: DANIELS, PATRICIA  
Address: 200 INDIAN HARBOR DR  
City-St-Zip: VERO BEACH, FL 32963

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: PATRICIA DANIELS

VPS

03/02/2009

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

\_\_\_\_\_ Date