

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S25829

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: PFP ASSOCIATES, INC.

## Current Principal Place of Business:

3801 PGA BLVD  
SUITE 910  
PALM BEACH GARDENS, FL 33410 US

## New Principal Place of Business:

## Current Mailing Address:

3801 PGA BLVD  
SUITE 910  
PALM BEACH GARDENS, FL 33410 US

## New Mailing Address:

FEI Number: 65-0242834      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MULLEN, ARNOLD  
3801 PGA BLVD  
SUITE 910  
PALM BEACH GARDENS, FL 33410 US

## Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-265 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: CORPORATION SERVICE COMPANY

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MULLEN, ARNOLD  
Address: 3801 PGA BLVD., SUITE 910  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: S ( ) Delete  
Name: COFFMAN, CAROL  
Address: 3801 PGA BLVD., SUITE 910  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: AS ( ) Delete  
Name: FIREMAN, PAUL  
Address: 3801 PGA BLVD., SUITE 910  
City-St-Zip: PALM BEACH GARDENS, FL 33410

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: FIREMAN, PAUL  
Address: 3801 PGA BLVD., SUITE 910  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: S (X) Change ( ) Addition  
Name: FIREMAN, PHYLLIS  
Address: 3801 PGA BLVD., SUITE 910  
City-St-Zip: PALM BEACH GARDENS, FL 33410

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

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: PAUL FIREMAN

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date