

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S31225

**FILED**  
**Feb 08, 2011**  
**Secretary of State**

**Entity Name:** ROSE MARIE GAMBA, C.P.A., P.A.

**Current Principal Place of Business:**

707 BONGART RD  
WINTER PARK, FL 327922707 US

**New Principal Place of Business:**

**Current Mailing Address:**

707 BONGART RD  
WINTER PARK, FL 327922707 US

**New Mailing Address:**

**FEI Number:** 59-3053852

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GAMBA, ROSE MARIE  
707 BONGART RD  
WINTER PARK, FL 327922707 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

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: GAMBA, ROSE MARIE  
Address: 707 BONGART RD  
City-St-Zip: WINTER PARK, FL 327922707

Title: D  
Name: GAMBA, ROSE MARIE  
Address: 707 BONGART RD  
City-St-Zip: WINTER PARK, FL 327922707

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: ROSE MARIE GAMBA

PRES

02/08/2011

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

\_\_\_\_\_  
Date