

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S94983

**FILED**  
**Mar 27, 2011**  
**Secretary of State**

**Entity Name:** STEPHEN L. ROSEN CORPORATION

**Current Principal Place of Business:**

2817 PARKLAND BLVD.  
TAMPA, FL 33609

**New Principal Place of Business:**

2819 W. PARKLAND BLVD.  
TAMPA, FL 33609

**Current Mailing Address:**

2817 PARKLAND BLVD.  
TAMPA, FL 33609

**New Mailing Address:**

2819 W. PARKLAND BLVD.  
TAMPA, FL 33609

**FEI Number:** 59-3094648

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSEN, LYNN A  
2817 PARKLAND BLVD.  
TAMPA, FL 33609 US

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

ROSEN, LYNN A  
2819 W. PARKLAND BLVD.  
TAMPA, FL 33609 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

03/27/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ROSEN, STEPHEN L  
Address: 2819 W. PARKLAND BLVD.  
City-St-Zip: TAMPA, FL 33609

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: STEPHEN L. ROSEN

PRES

03/27/2011

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

\_\_\_\_\_  
Date