

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V47081

FILED  
Feb 27, 2010  
Secretary of State

**Entity Name:** LAW OFFICES OF BRUCE A. GLOTZER, P.A.

**Current Principal Place of Business:**

5295 TOWN CENTER ROAD  
SUITE 201  
BOCA RATON, FL 33486 US

**New Principal Place of Business:**

**Current Mailing Address:**

5295 TOWN CENTER ROAD  
SUITE 201  
BOCA RATON, FL 33486 US

**New Mailing Address:**

**FEI Number:** 65-0343560

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GLOTZER, BRUCE A.  
5295 TOWN CENTER ROAD  
SUITE 201  
BOCA RATON, FL 33486 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:** P  
**Name:** GLOTZER, BRUCE A.  
**Address:** 5295 TOWN CENTER ROAD SUITE 201  
**City-St-Zip:** BOCA RATON, FL 33486

**Title:** VP  
**Name:** KOBREN, MATTHEW  
**Address:** 5295 TOWN CENTER ROAD SUITE 201  
**City-St-Zip:** BOCA RATON, FL 33486

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:** BRUCE GLOTZER

P

02/27/2010

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

\_\_\_\_\_  
Date