

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L29149

FILED  
May 15, 2008  
Secretary of State

**Entity Name:** DRUCKER & FALK MANAGEMENT CORPORATION OF FLORIDA, INC.

**Current Principal Place of Business:**

11824 FISHING POINT DRIVE  
NEWPORT NEWS, VA 23606

**New Principal Place of Business:**

**Current Mailing Address:**

11824 FISHING POINT DRIVE  
NEWPORT NEWS, VA 23606

**New Mailing Address:**

FEI Number: 65-0161353      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MARCHMAN, KENNETH R  
227 WEST PARK AVENUE  
WINTER PARK, FL 32789      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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DRUCKER, WENDY C  
Address: 11824 FISHING POINT DRIVE  
City-St-Zip: NEWPORT NEWS, VA 23606

Title: VPAS ( ) Delete  
Name: MELVIN, RONALD B  
Address: 11824 FISHING POINT DRIVE  
City-St-Zip: NEWPORT NEWS, VA 23606

Title: VPAS ( ) Delete  
Name: FALK, DAVID C JR.  
Address: 11824 FISHING POINT DRIVE  
City-St-Zip: NEWPORT NEWS, VA 23606

Title: VPAS ( ) Delete  
Name: FALK-TILLET, KELLIE  
Address: 11824 FISHING POINT DRIVE  
City-St-Zip: NEWPORT NEWS, VA 23606

Title: ST ( ) Delete  
Name: BUCK, GUY  
Address: 11824 FISHING POINT DRIVE  
City-St-Zip: NEWPORT NEWS, VA 23606

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

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

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

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

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

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: WENDY C. DRUCKER

PD

05/15/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date