

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 476818

FILED  
Jan 21, 2009  
Secretary of State

Entity Name: GLATTING JACKSON KERCHER ANGLIN, INC.

**Current Principal Place of Business:**

120 NORTH ORANGE AVE  
ORLANDO, FL 328012607

**New Principal Place of Business:**

**Current Mailing Address:**

120 NORTH ORANGE AVE  
ORLANDO, FL 328012607

**New Mailing Address:**

FEI Number: 59-1594244      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

CROWELL, PATRICK  
4853 S ORANGE AVE  
SUITE B  
ORLANDO, FL 32806 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: C ( ) Delete  
Name: KERCHER, WILLIAM C JR  
Address: 712 S LAKE ADAIR BLVD  
City-St-Zip: ORLANDO, FL 32804

Title: PT ( ) Delete  
Name: JACKSON, TIMOTHY T  
Address: 1397 S RIDGE LAKE CIRCLE  
City-St-Zip: LONGWOOD, FL 32750

Title: V ( ) Delete  
Name: HOOD, JAY R  
Address: 111114 CRESCENT BAY BLVD  
City-St-Zip: CLERMONT, FL 34711

Title: S ( ) Delete  
Name: LAMANTIA, SHARON K  
Address: 375 KAPOK COURT  
City-St-Zip: LONGWOOD, FL 32779

Title: V ( ) Delete  
Name: BARTH, DAVID L  
Address: 4 BUNKER PLACE  
City-St-Zip: TEQUESTA, FL 33469

Title: V ( ) Delete  
Name: EXUM, JAY H  
Address: 2253 PEACHLEAF COURT  
City-St-Zip: LONGWOOD, FL 32779

**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:

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: TIMOTHY T. JACKSON

PT

01/21/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date