2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 600724

Entity Name: KETCHUM, WOOD & BURGERT, CHARTERED

FILED Mar 12, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
1899 EIDER COURT POST OFFICE BOX 14389 TALLAHASSEE, FL 32308 US			P. O. BOX	1899 EIDER COURT P. O. BOX 14389 TALLAHASSEE, FL 32308 US		
Current Mailing Address:			New Maili	New Mailing Address:		
1899 EIDER COURT POST OFFICE BOX 14389 TALLAHASSEE, FL 32317				POST OFFICE BOX 14389 TALLAHASSEE, FL 32317		
FEI Number:	59-1228604	FEI Number Applied For () FEI N	lumber Not Appl	olicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
HARRIS, JERRY L 1899 EIDER COURT TALLAHASSEE, FL 32308 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		Date		
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	S () D STEWART, D 1899 EIDER COU TALLAHASSEE, F	RT	Title: Name: Address: City-St-Zip:	SD (X) Change () Addition STEWART, D 1899 EIDER COURT TALLAHASSEE, FL 32308		
Title: Name: Address: City-St-Zip:	VD () D NEAL, MARGARE 1899 EIDER COU TALLAHASSEE, F	T H RT	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VD () D SARBECK, LOUIS 1899 EIDER COU TALLAHASSEE, F	SS RT	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	P () D HARRIS, JERRY I 1899 EIDER COU TALLAHASSEE, F	, RT	Title: Name: Address: City-St-Zip:	PD (X) Change () Addition HARRIS, JERRY L., 1899 EIDER COURT TALLAHASSEE, FL		
Title: Name: Address: City-St-Zip:	V/D () D MAHONEY, JOHN 1899 EIDER COU TALLAHASSEE, F	P RT	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	V/D () D MANNING, CHARI 1899 EIDER COU TALLAHASSEE F	LES F JR. RT	Title: Name: Address: City-St-Zip:	() Change () Addition		

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: JERRY L. HARRIS PD 03/12/2009