

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 602316

FILED
Feb 17, 2009
Secretary of State

Entity Name: ALLEN, DYER, DOPPELT, MILBRATH & GILCHRIST, P.A.

Current Principal Place of Business:

255 SOUTH ORANGE AVENUE
SUITE 1401
ORLANDO, FL 32801 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3791
ORLANDO, FL 328020791

New Mailing Address:

FEI Number: 59-1298851 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, HERBERT L
255 SOUTH ORANGE AVE., SUITE 1401
ORLANDO, FL 32801 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: VP () Delete
Name: REGAN, CHRISTOPHER F
Address: 255 S ORANGE AVENUE, STE 1401
City-St-Zip: ORLANDO, FL 32801

Title: VP () Delete
Name: MILBRATH, STEPHEN
Address: 255 SOUTH ORANGE AVE., SUITE 1401
City-St-Zip: ORLANDO, FL 32801

Title: VP () Delete
Name: SIGALOW, DAVID L
Address: 255 SOUTH ORANGE AVE., SUITE 1401
City-St-Zip: ORLANDO, FL 32801

Title: VP () Delete
Name: DYER, ROBERT
Address: 255 SOUTH ORANGE AVE., SUITE 1401
City-St-Zip: ORLANDO, FL 32801

Title: PD () Delete
Name: GILCHRIST, BRIAN R.
Address: 255 SOUTH ORANGE AVE., SUITE 1401
City-St-Zip: ORLANDO, FL 32801

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: BRIAN R. GILCHRIST

PD

02/17/2009

Electronic Signature of Signing Officer or Director

_____ Date