

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 616510

FILED
Mar 17, 2008
Secretary of State

Entity Name: CROSLAND, JOINER, SCHORTZ, SORAH & COMPANY, P.A.

Current Principal Place of Business:

3005 CARING WAY STE A
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

4161 TAMIAMI TRAIL, SUITE 501
PORT CHARLOTTE, FL 33952

Current Mailing Address:

3005 CARING WAY STE A
PORT CHARLOTTE, FL 33952

New Mailing Address:

4161 TAMIAMI TRAIL, SUITE 501
PORT CHARLOTTE, FL 33952

FEI Number: 59-1892838

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROSLAND, BRIAN W
3005 CARING WAY, SUITE A
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

CROSLAND, BRIAN W
4161 TAMIAMI TRAIL, SUITE 501
PORT CHARLOTTE, FL 33952 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: _____

03/17/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: SCHORTZ, JOSEPH R
Address: 3977 LACOSTA ISLAND CT
City-St-Zip: PUNTA GORDA, FL 33950

Title: PT () Delete
Name: CROSLAND, BRIAN W
Address: 2274 BREMEN CT
City-St-Zip: PUNTA GORDA, FL 33983

Title: VPS () Delete
Name: JOINER, J. SCOTT
Address: PO BOX 511087
City-St-Zip: PUNTA GORDA, FL 339511087

Title: VP () Delete
Name: SORAH, DARA B
Address: 18123 REGAN AVE
City-St-Zip: PORT CHARLOTTE, FL 33948

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:

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 W CROSLAND

PRES

03/17/2008

Electronic Signature of Signing Officer or Director

Date