

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 841657

FILED  
Jan 19, 2009  
Secretary of State

Entity Name: HAZEN AND SAWYER, P.C.

**Current Principal Place of Business:**

4000 HOLLYWOOD BOULEVARD  
SUITE 750N  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

**Current Mailing Address:**

4000 HOLLYWOOD BOULEVARD  
SUITE 705N  
HOLLYWOOD, FL 33021

**New Mailing Address:**

FEI Number: 13-2904652      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301      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: VD ( ) Delete  
Name: DAVIS, PATRICK,  
Address: 921 SOUTHEAST 8TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: VD ( ) Delete  
Name: BORS, GARY W.,  
Address: 2532 NORTHEAST 22ND AVENUE  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: VP ( ) Delete  
Name: COWGILL, JAMES T.,  
Address: 2506 BARBARA DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: PD ( ) Delete  
Name: FAGAN, JAMES W.,  
Address: 498 7TH AVENUE, 11TH FLOOR  
City-St-Zip: NEW YORK, NY 10018

Title: VDST ( ) Delete  
Name: DIFIORE, ROBERT S.,  
Address: 729 BENNINGTON DRIVE  
City-St-Zip: RALEIGH, NC 27615

Title: VD ( ) Delete  
Name: SMITH, ROBERT D  
Address: 179 DEGRAW STREET  
City-St-Zip: BROOKLYN, NY 11231

**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: WILLIAM A. CRAYON

CFO

01/19/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date