

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M90847

FILED
Feb 13, 2009
Secretary of State

Entity Name: FORENSIC COMMUNICATION ASSOCIATES, INC.

Current Principal Place of Business:

229 SW 43 TERR.
GAINESVILLE, FL 32607 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 12323
UNIVERSITY STATION
GAINESVILLE, FL 32604 US

New Mailing Address:

229 SW 43 TERR.
GAINESVILLE, FL 32607 US

FEI Number: 59-2903495

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLLIEN, PATRICIA
229 SW 43 TERRACE
GAINESVILLE, FL 32607 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: PD () Delete
Name: HOLLIEN, PATRICIA A.,
Address: 229 S.W. 43RD TERRACE
City-St-Zip: GAINESVILLE, FL

Title: SCV () Delete
Name: HOLLIEN, HARRY
Address: 229 SW 43 TERR
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: PATRICIA HOLLIEN

DIR.

02/13/2009

Electronic Signature of Signing Officer or Director

Date