2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000056726

Entity Name: MIKSCH & COMPANY, CPA, P.A.

FILED Apr 02, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4615 GULF BLVD. 249 43RD AVE

SUITE 201 ST. PETE BEACH, FL 33706

ST. PETE BEACH, FL 33706

Current Mailing Address: New Mailing Address:

4615 GULF BLVD. 249 43RD AVE

SUITE 201 ST. PETE BEACH, FL 33706 ST. PETE BEACH, FL 33706

FEI Number: 59-3653607 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MIKSCH, DIANE MIKSCH, DIANE 4615 GULF BLVD. MIKSCH, DIANE 249 43RD AVE.

SUITE 201 ST. PETE BEACH, FL 33706 US

ST. PETE BEACH, FL 33706 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: DIANE MIKSCH 04/02/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: () Change () Addition

 Name:
 MIKSCH, DIANE
 Name:

 Address:
 249 43RD AVE
 Address:

 City-St-Zip:
 ST. PETE BEACH, FL 33706
 City-St-Zip:

Title: VD () Delete Title: VD (X) Change () Addition

Name: NEWMAN, KEITH Name: NEWMAN, KEITH

 Address:
 3535 1ST AVE N
 Address:
 3535 1ST AVE N

 City-St-Zip:
 SAINT PETERSBURG, FL 337138401
 City-St-Zip:
 ST. PETERSBURG, FL 33713

Title: S (X) Delete Title: () Change () Addition

 Name:
 LARSON, KAREN
 Name:

 Address:
 4615 GULF BLVD., SUITE 201
 Address:

 City-St-Zip:
 ST. PETE BEACH, FL 33706
 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: DIANE MIKSCH P 04/02/2009