

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000054228

FILED
Jan 16, 2008
Secretary of State

Entity Name: BRANT, ABRAHAM, REITER, MCCORMICK & GREENE, P.A.

Current Principal Place of Business:

50 N LAURA ST, STE 2750
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

PO BOX 4548
JACKSONVILLE, FL 32201

New Mailing Address:

FEI Number: 59-3722057

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCORMICK, JAN D
50 NORTH LAURA STREET
SUITE 2750
JACKSONVILLE, FL 32202 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: BRANT, WILLIAM P
Address: 1365 CADDELL DR
City-St-Zip: JACKSONVILLE, FL 32217

Title: VD () Delete
Name: REITER, THOMAS M
Address: 1633 BERWICK RD
City-St-Zip: JACKSONVILLE, FL 32207

Title: VD () Delete
Name: ABRAHAM, DAVID T
Address: 5950 CLIFTON AVE
City-St-Zip: JACKSONVILLE, FL 32211

Title: VD () Delete
Name: MCCORMICK, JAN D
Address: 7230 RAMOTH DR
City-St-Zip: JACKSONVILLE, FL 32226

Title: VD () Delete
Name: GREENE, CHRISTOPHER J
Address: 176 SAN JUAN DR
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VD () Delete
Name: WILLIAMSON, GREGORY A
Address: 3565 CRESCENT POINT COURT
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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: JAN D. MCCORMICK

VD

01/16/2008

Electronic Signature of Signing Officer or Director

Date