

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000147094

FILED
Apr 30, 2009
Secretary of State

Entity Name: CHARLES O. MATTHEWS, PH.D., P.A.

Current Principal Place of Business:

12909 NORTH 56TH STREET
SUITE 203
TAMPA, FL 33617 US

New Principal Place of Business:

Current Mailing Address:

12909 NORTH 56TH STREET
SUITE 203
TAMPA, FL 33617 US

New Mailing Address:

FEI Number: 20-5954347 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTHEWS, CHARLES O PH.D.
12909 NORTH 56TH STREET
SUITE 203
TAMPA, FL 33617 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: PRES () Delete
Name: MATTHEWS, CHARLES O PH.D.
Address: 3451 EAST LAKE DRIVE
City-St-Zip: LAND O'LAKES, FL 34639 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MATTHEWS, CHARLES O PH.D.
Address: 22744 CLIFFSIDE WAY
City-St-Zip: LAND O LAKES, FL 34639 US

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: CHARLES O. MATTHEWS, PH.D.

PRES

04/30/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date