

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000095568

FILED
Mar 28, 2009
Secretary of State

Entity Name: ALAN AND MARILYN COHEN, P.A.

Current Principal Place of Business:

COHEN
1792 LAGO VISTA BLVD
PALM HARBOR, FL 34685

New Principal Place of Business:

COHEN
3090 CHARLES AVE
CLEARWATER, FL 33761

Current Mailing Address:

COHEN
1792 LAGO VISTA BLVD
PALM HARBOR, FL 34685

New Mailing Address:

COHEN
P.O. BOX 69
GUILD, TN 37340

FEI Number: 59-3607663

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, MARILYN A
COHEN
1792 LAGO VISTA BLVD
PALM HARBOR, FL 34685 US

Name and Address of New Registered Agent:

COHEN, MARILYN A
COHEN
3090 CHARLES AVE
CLEARWATER, FL 33761 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: MARILYN A COHEN

03/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COHEN, MARILYN A
Address: 1792 LAGO VISTA BLVD
City-St-Zip: PALM HARBOR, FL 34685

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: COHEN, MARILYN A
Address: 170 CHESADU CIRCLE
City-St-Zip: GUILD, TN 37340

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: MARILYN A COHEN

PD

03/28/2009

Electronic Signature of Signing Officer or Director

Date