

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S15795

FILED
Jan 21, 2009
Secretary of State

Entity Name: GILLIGAN, KING, GOODING & GIFFORD, P.A.

Current Principal Place of Business:

1531 SE 36TH AVENUE
OCALA, FL 34471 US

New Principal Place of Business:

Current Mailing Address:

1531 SE 36TH AVENUE
OCALA, FL 34471 US

New Mailing Address:

FEI Number: 59-3040825

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILLIGAN, PATRICK G
1531 SE 36TH AVENUE
OCALA, FL 34471 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: VP,S () Delete
Name: GILLIGAN, PATRICK G
Address: 2309 SE 5TH STREET
City-St-Zip: Ocala, FL 34471

Title: P () Delete
Name: KING, WILLIAM ALLAN
Address: 700 SE 48TH AVE
City-St-Zip: Ocala, FL 34471

Title: VP () Delete
Name: GOODING, W. JAMES III
Address: 2245 SE 11TH ST
City-St-Zip: Ocala, FL 34471

Title: VP,T () Delete
Name: GIFFORD, ERIC P
Address: 5101 SE 11TH AVENUE
City-St-Zip: Ocala, FL 34480

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:

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: WILLIAM ALLAN KING

P

01/21/2009

Electronic Signature of Signing Officer or Director

Date