

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 654143

FILED
Apr 27, 2009
Secretary of State

Entity Name: FLAD & ASSOCIATES OF FLORIDA, INC.

Current Principal Place of Business:

3300 S.W. ARCHER ROAD
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

2828 MARSHALL COURT
SUITE 200
MADISON, WI 53705

New Mailing Address:

FEI Number: 39-1346633

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: STD () Delete
Name: PETERSON, MICHAEL C
Address: 2828 MARSHALL CT STE 200
City-St-Zip: MADISON, WI 53705

Title: D () Delete
Name: ZUTZ, JEFF C
Address: 644 SCIENCE DRIVE
City-St-Zip: MADISON, WI 53711

Title: D () Delete
Name: BLASSICK, JOHN E
Address: 3300 SW ARCHER ROAD
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MP (X) Change () Addition
Name: GYLLSTROM, THOMAS H
Address: 3300 SW ARCHER ROAD
City-St-Zip: GAINESVILLE, FL 32608

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: MICHAEL C PETERSON

STD

04/27/2009

Electronic Signature of Signing Officer or Director

Date