

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 213164

FILED
Apr 04, 2008
Secretary of State

Entity Name: DON MOTT ASSOCIATES, INC.

Current Principal Place of Business:

329 NORTH PARK AVENUE
SUITE 300
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 4961
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 59-0832766 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

B & C CORPORATE SERVICES OF CENTRAL FLA.
390 NORTH ORANGE AVENUE
SUITE 1400
ORLANDO, FL 32801 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: DST () Delete
Name: GINSBURG, ALAN H
Address: 1551 SANDSPUR ROAD
City-St-Zip: MAITLAND, FL 32751

Title: P () Delete
Name: SCIARRINO, MICHAEL J
Address: 329 N. PARK AVENUE, STE 300
City-St-Zip: WINTER PARK, FL 32789 US

Title: V () Delete
Name: BROCK, JAY P
Address: 329 N. PARK AVENUE, STE 300
City-St-Zip: WINTER PARK, FL 32789 US

Title: VP () Delete
Name: DOODY, TRICIA
Address: 329 N. PARK AVENUE, STE 300
City-St-Zip: WINTER PARK, FL 32789 US

Title: CFO () Delete
Name: MISSIGMAN, PAUL M
Address: 329 N. PARK AVENUE, STE 300
City-St-Zip: WINTER PARK, FL 32789

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: SCIARRINO, MICHAEL J
Address: 329 N. PARK AVENUE, STE 300
City-St-Zip: WINTER PARK, FL 32789 US

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: VP,D () Change (X) Addition
Name: MISSIGMAN, PAUL M
Address: 329 N. PARK AVENUE, STE 300
City-St-Zip: WINTER PARK, FL 32789

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: PAUL M. MISSIGMAN, VP

VP

04/04/2008

Electronic Signature of Signing Officer or Director

_____ Date