

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 523567

FILED
Apr 27, 2009
Secretary of State

Entity Name: MYER AND SIMON ACCOUNTANTS, INC.

Current Principal Place of Business:

3905 S. SHADE AVE.
PO BOX 5305
SARASOTA, FL 34277

New Principal Place of Business:

3905 S. SHADE AVE.
SARASOTA, FL 34231

Current Mailing Address:

3905 S. SHADE AVE.
PO BOX 5305
SARASOTA, FL 34277

New Mailing Address:

3905 S. SHADE AVE.
SARASOTA, FL 34231

FEI Number: 59-1784888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMON, STEPHEN
3905 S. SHADE AVE
SARASOTA, FL 33579 US

Name and Address of New Registered Agent:

SIMON, STEPHEN
3905 S. SHADE AVE
SARASOTA, FL 34231 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:

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SIMON, STEPHEN
Address: 3905 S. SHADE AVE
City-St-Zip: SARASOTA, FL 33579,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SIMON, STEPHEN
Address: 3905 S. SHADE AVE
City-St-Zip: SARASOTA, FL 34231

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: STEPHEN SIMON

PD

04/27/2009

Electronic Signature of Signing Officer or Director

Date