

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 530103

FILED  
May 21, 2008  
Secretary of State

Entity Name: FRANK P. ANDERSON & ASSOCIATES, INC.

**Current Principal Place of Business:**

2231 HEATHGREEN PLACE SOUTH  
JACKSONVILLE, FL 322467225 US

**New Principal Place of Business:**

**Current Mailing Address:**

PMB 348  
14286 BEACH BLVD., STE. 19  
JACKSONVILLE BEACH, FL 32250

**New Mailing Address:**

2231 HEATHGREEN PLACE SOUTH  
JACKSONVILLE, FL 322467225 US

FEI Number: 59-1725943

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

HOLBROOK, H. LEON  
2301 INDEPENDENT SQUARE  
JACKSONVILLE, FL 32202 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: V ( ) Delete  
Name: ANDERSON, JAN,  
Address: 4600 MIDDLETON PARK CIR EAST APT 412B  
City-St-Zip: JACKSONVILLE, FL 322246623

Title: VS ( ) Delete  
Name: MATHEWS, ANDREA A.,  
Address: 2231 HEATH GREEN PL SO  
City-St-Zip: JACKSONVILLE, FL 322467225

Title: PD (X) Delete  
Name: ANDERSON, FRANK P  
Address: 4600 MIDDLETON PARK CIR. EAST APT. 412.B  
City-St-Zip: JACKSONVILLE, FL 322246623

Title: PD (X) Delete  
Name: ANDERSON, FRANK P.,  
Address: 4600 MIDDLETON PARK CIR. EAST, APT. 412B  
City-St-Zip: JACKSONVILLE, FL 322246623

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: V (X) Change ( ) Addition  
Name: ANDERSON, JAN,  
Address: 2231 HEATH GREEN PL. S.  
City-St-Zip: JACKSONVILLE, FL 322246623

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: ANDREA MATHEWS

MS

05/21/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date