


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2008 8:00 am
Secretary of State

01-30-2008 90023 009 ***150.00

DOCUMENT # 601867 1. Entity Name MOYLE, FLANIGAN, KATZ, BRETON, WHITE & KRASKER, P.A.					
Principal Place of Business 625 N. FLAGLER DR. 9TH FL. WEST PALM BEACH, FL 33401-4025			Mailing Address P.O. BOX 3888 WEST PALM BEACH, FL 33402-3888		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1304995	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FLANIGAN, JOHN F 625 N. FLAGLER DRIVE, 9TH FLOOR WEST PALM BEACH, FL 33401			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MOYLE, JON C 7148 LEEWARD ST PORT SAINT JOE, FL 32456	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASD KATZ, MARTIN 7287 PIONEER ROAD WEST PALM BEACH, FL 33413	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD FLANIGAN, JOHN F 436 OYSTER RD NORTH PALM BEACH, FL 33408	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITE, WILTON L 2549 SEMINOLE CIR WEST PALM BEACH, FL 33409	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DRASKER, PAUL A 500 VALENCIA RD. WEST PALM BEACH, FL 33405	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D KRASKER, PAUL A 500 VALENCIA RD WEST PALM BEACH, FL 33405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HACKNEY, ROBERT C 4119 LAKESPUR CIR. S. PALM BEACH GARDENS, FL 33410	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____		MARTIN V. KATZ		1.25.2007 (561)659-7500	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

ATTACHMENT

2008 For Profit Corporation
Annual Report - Page 2
Document #601867
FEI No.: 59-1304995

40013318

10. Continued - OFFICERS AND DIRECTORS
11. Continued - ADDITIONS/CHANGES TO OFFICERS DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lynch, Francis X.J. 18862 Fetterbush Court Jupiter, FL 33458	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Moyle, Jon Jr. 1006 Washington Street Tallahassee, FL 32302	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Osofsky, Marshall J. 425 35th Street West Palm Beach, FL 33407	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Suarez-Murias, Marta 325 Leeward Dr. Jupiter, FL 33477	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Doorakian, Daniel R. 8288 Bob O Link Dr. West Palm Beach, FL 33412	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Breton, Peter L. 7122 NW 42nd Court Coral Springs, FL 33065	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Eubanks, John R. 131 Lucina Drive Hypoluxo, FL 33462	