2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 605119

Entity Name: YOUNG VAN ASSENDERP, P.A.

FILED Jan 08, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
225 S. ADAMS ST. SUITE 200 POST OFFICE BOX 1833 TALLAHASSEE, FL 32301			SUITE 200	225 S. ADAMS STREET SUITE 200 TALLAHASSEE, FL 32301	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
POST OFF	AMS ST. SUITE FICE BOX 1833 SSEE, FL 3230				
FEI Number: 59-1480346 FEI Number Applied For () FEI Number			FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and Address	of New Registered Agent:	
YOUNG, ROY C 225 S. ADAMS ST. ST. 200 SUITE 200 TALLAHASSEE, FL 32301 US					
	named entity su of Florida.	ubmits this statement for the pu	rpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			t	Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	S ()[BUFORD, TASHA 225 S. ADAMS S TALLAHASSEE,	т.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T ()[VAN ASSENDER 225 S. ADAMS S TALLAHASSEE,	T #200	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () I YOUNG, ROY C, 225 S. ADAMS S TALLAHASSEE,	T #200	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP ()[DEE, DAVID S 225 S.ADAMS ST TALLAHASSEE,	г	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () [LABASKY, RONA 225 S.ADAMS ST TALLAHASSEE,	Γ	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP ()[LAVIA, JOHN T II 225 S.ADAMS STALLAHASSEE,	Г	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ROY C. YOUNG P 01/08/2009