2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 629121

Entity Name: ROSE & ROSE, P.A.

FILED Apr 16, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5295 TOWN CENTER RD 1800 N.W. CORPORATE BLVD.

SUITE 300 SUITE 302

BOCA RATON, FL 33486 BOCA RATON, FL 33431

Current Mailing Address: New Mailing Address:

5295 TOWN CENTER RD 1800 N.W. CORPORATE BLVD.

SUITE 300 SUITE 302

BOCA RATON, FL 33486 BOCA RATON, FL 33431

FEI Number: 59-1918519 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ROSE, PETER A
5295 TOWN CENTER RD
SUITE 300

ROSE, PETER A
1800 N.W. CORPORATE BLVD.
SUITE 302

BOCA RATON, FL 33486 US BOCA RATON, FL 33431 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: PETER A ROSE 04/16/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition

 Name:
 ROSE, PETER A
 Name:
 ROSE, PETER A

 Address:
 5295 TOWN CENTER RD
 Address:
 1800 N.W. CORPORATE BLVD., #302

City-St-Zip: BOCA RATON, FL 33486 City-St-Zip: BOCA RATON, FL 33431

Title: SD () Delete Title: SD (X) Change () Addition

Name: ROSE, ANDREW C Name: ROSE, ANDREW C

Address: 5295 TOWN CENTER RD Address: 1800 N.W. CORPORATE BLVD., #302

City-St-Zip: BOCA RATON, FL 33486 City-St-Zip: BOCA RATON, FL 33431

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: PETER ROSE DP 04/16/2008