

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 638355

FILED  
Mar 21, 2008  
Secretary of State

Entity Name: G. R. MOON, D. C., P.A.

## Current Principal Place of Business:

4760 TAMIAMI TRAIL  
NAPLES, FL 33940

## New Principal Place of Business:

1190 PINE RIDGE ROAD  
SUITE 1  
NAPLES, FL 34108

## Current Mailing Address:

4760 TAMIAMI TRAIL  
NAPLES, FL 33940

## New Mailing Address:

1190 PINE RIDGE ROAD  
SUITE 1  
NAPLES, FL 34108

FEI Number: 59-1954002

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOON, G.R., D.C.  
4760 TAMIAMI TRAIL  
NAPLES, FL 33940 US

## Name and Address of New Registered Agent:

MOON, G.R., D.C.  
1190 PINE RIDGE ROAD  
SUITE 1  
NAPLES, FL 34108 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: G.R. MOON

03/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MOON, G.R.,  
Address: 4760 TAMIAMI TRAIL  
City-St-Zip: NAPLES, FL

Title: ST ( ) Delete  
Name: MOON, F WANDA,  
Address: 6914 WELLINGTON DR  
City-St-Zip: NAPLES, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: MOON, G.R.,  
Address: 1190 PINE RIDGE ROAD  
City-St-Zip: NAPLES, FL 34108

Title: ST (X) Change ( ) Addition  
Name: MOON, F WANDA,  
Address: 1190 PINE RIDGE ROAD  
City-St-Zip: NAPLES, FL 34108

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: G.R. MOON

PRES

03/21/2008

Electronic Signature of Signing Officer or Director

Date