2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008
Secretary of State

DOCUMENT# 646887

Entity Name: AGUILAR, SIERON & YEOMANS, P.A.

Current Principal Place of Business:

1045 N ORANGE AVE STE 1
GREEN COVE SPRINGS, FL 32043

New Principal Place of Business:

1045 N ORANGE AVE
SUITE 3
GREEN COVE SPRINGS, FL 32043

Current Mailing Address:

PO BOX 855
ORANGE PARK, FL 32067

New Mailing Address:

FEI Number: 59-1951189 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIERON, MARK A
1045 N .ORANGE AVE STE
GREEN COVE SPRINGS, FL 32043 US

Name and Address of New Registered Agent:

SIERON, MARK A
1045 N .ORANGE AVE
SUITE 3
GREEN COVE SPRINGS, FL 32043 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: MARK A. SIERON 04/21/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: AGUILAR, ROBERT
Address: 1045 N. ORANGE AVENUE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: VD ( ) Delete
Name: SIERON, MARK A
Address: 1045 N. ORANGE AVENUE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: VD ( ) Delete
Name: YEOMANS, MARYANNE
Address: 1045 N ORANGE AVE STE 1
City-St-Zip: GREEN COVE SPRINGS, FL 32043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: MARK A. SIERON VP 04/21/2008
Electronic Signature of Signing Officer or Director Date