

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 656009

FILED
Apr 16, 2009
Secretary of State

Entity Name: COMMUNICATION PLANNING CORPORATION

Current Principal Place of Business:

4949 SUNBEAM ROAD, SUITE 16
JACKSONVILLE, FL 322576143 US

New Principal Place of Business:

4949 SUNBEAM ROAD
SUITE 16
JACKSONVILLE, FL 322576143 US

Current Mailing Address:

4949 SUNBEAM ROAD, SUITE 16
JACKSONVILLE, FL 322576143 US

New Mailing Address:

4949 SUNBEAM ROAD
SUITE 16
JACKSONVILLE, FL 322576143 US

FEI Number: 59-1972945

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BISBEE, FRANK D., III
4949 SUNBEAM ROAD, SUITE 16
JACKSONVILLE, FL 322576143 US

Name and Address of New Registered Agent:

BISBEE, FRANK D., III
4949 SUNBEAM ROAD
SUITE 16
JACKSONVILLE, FL 322576143 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: FRANK D BISBEE III

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: APD () Delete
Name: BISBEE, FRANK D. III
Address: 4949 SUNBEAM ROAD, SUITE 16
City-St-Zip: JACKSONVILLE, FL 322576143 US

Title: SVD () Delete
Name: BISBEE, ANNA G.
Address: 4949 SUNBEAM ROAD, SUITE 16
City-St-Zip: JACKSONVILLE, FL 322576143 US

Title: VD () Delete
Name: GILLES, MICHELLE R.
Address: 4949 SUNBEAM ROAD, SUITE 16
City-St-Zip: JACKSONVILLE, FL 322576143 US

Title: VD () Delete
Name: SHANAHAN, MICHAEL A
Address: 4949 SUNBEAM ROAD, SUITE 16
City-St-Zip: JACKSONVILLE, FL 322576143 US

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:

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: ANNA G BISBEE

VP

04/16/2009

Electronic Signature of Signing Officer or Director

Date