


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 25, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # 669974**  
 1. Entity Name  
 THE DYE LAW FIRM, P.A.



Principal Place of Business  
 236 E 5TH AVENUE  
 TALLAHASSEE, FL 32303 US

Mailing Address  
 P.O. BOX 4148  
 TALLAHASSEE, FL 32315 US

**DO NOT WRITE IN THIS SPACE**



04222008 No Chg-P CR2E034 (11/05)

4. FEI Number  
 59-2009839

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
 DYE, JIMMY  
 236 E 5TH AVENUE  
 TALLAHASSEE, FL 32303

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

U00000921839  
 05/15/08-80026-004 150.00

10. OFFICERS AND DIRECTORS

TITLE	VST
NAME	DYE, JIMMY
STREET ADDRESS	317 EAST CALL STREET
CITY-ST-ZIP	TALLAHASSEE, FL
TITLE	PD
NAME	DYE, JIMMY
STREET ADDRESS	236 EAST 5TH AVENUE
CITY-ST-ZIP	TALLAHASSEE, FL 32303
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jimmy Dye 4-24-08 850-224-1205

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #