

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000000803

FILED
Apr 18, 2011
Secretary of State

Entity Name: GALLOWAY, JOHNSON, TOMPKINS, BURR & SMITH, A PROFESSIONAL LAW CORPORATION

Current Principal Place of Business:

118 EAST GARDEN ST.
PENSACOLA, FL 32502 US

New Principal Place of Business:

Current Mailing Address:

118 EAST GARDEN ST.
PENSACOLA, FL 32502 US

New Mailing Address:

FEI Number: 72-1089568 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BURR, TIMOTHY F
281 PLANTATION HILL RD
GULF BREEZE, FL 32561 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D
Name: GALLOWAY, JOHN E
Address: 4817 JANICE STREET
City-St-Zip: KENNER, LA 70062

Title: D
Name: PHARR, MARK
Address: 101 BONNER DR
City-St-Zip: LAFAYETTE, LA 70508

Title: D
Name: TOMPKINS, JAMES M
Address: 2004 MILFORD
City-St-Zip: HOUSTON, TX 77098

Title: D
Name: BURR, TIMOTHY F
Address: 281 PLANTATION HILL ROAD
City-St-Zip: GULF BREEZE, FL 32561

Title: D
Name: SMITH, THOMAS J
Address: 59 W MAJESTIC WOODS
City-St-Zip: THE WOODLANDS, TX 77382

Title: D
Name: CANADA, LARRY G
Address: 6471 GEN HAIG
City-St-Zip: NEW ORLEANS, LA 70124

I hereby 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 all other like empowered.

SIGNATURE: TIMOTHY F BURR

_____ Electronic Signature of Signing Officer or Director

DIR

04/18/2011

_____ Date