2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99210

FILED Jan 10, 2011 Secretary of State

Entity Name: LAW OFFICES OF JOHN T. MORRISON, P.A.

Current Mailing Address: 1612 NW BOCA RATON BLVD 8 BOCA RATON, FL 33432 US FEI Number: 59-2216458 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: MORRISON, JOHN T. 1612 N.W. BOCA RATON BLVD. SUITE 8 BOCA RATON, FL 33432 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.	Current Principal Place of Business:		New Principal Place of Business:		
Current Mailing Address: New Mailing Address: 1612 NW BOCA RATON BLVD 8 BOCA RATON, FL 33432 US FEI Number: 59-2216458 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: MORRISON, JOHN T. 1612 N.W. BOCA RATON BLVD. SUITE 8 BOCA RATON, FL 33432 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:		BLVD			
1612 NW BOCA RATON BLVD 8 BOCA RATON, FL 33432 US FEI Number: 59-2216458 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MORRISON, JOHN T. 1612 N.W. BOCA RATON BLVD. SUITE 8 BOCA RATON, FL 33432 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:	BOCA RATON, FL 33432	US			
8 BOCA RATON, FL 33432 US FEI Number: 59-2216458 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MORRISON, JOHN T. 1612 N.W. BOCA RATON BLVD. SUITE 8 BOCA RATON, FL 33432 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:	Current Mailing Address:		New Mailing Address:		
BOCA RATON, FL 33432 US FEI Number: 59-2216458 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MORRISON, JOHN T. 1612 N.W. BOCA RATON BLVD. SUITE 8 BOCA RATON, FL 33432 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:		BLVD			
Name and Address of Current Registered Agent: MORRISON, JOHN T. 1612 N.W. BOCA RATON BLVD. SUITE 8 BOCA RATON, FL 33432 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:	BOCA RATON, FL 33432	US			
MORRISON, JOHN T. 1612 N.W. BOCA RATON BLVD. SUITE 8 BOCA RATON, FL 33432 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:	FEI Number: 59-2216458	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
1612 N.W. BOCA RATON BLVD. SUITE 8 BOCA RATON, FL 33432 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:	Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
in the State of Florida. SIGNATURE:	SUITE 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.				
Electronic Signature of Registered Agent Date	SIGNATURE:				
	Electronic	Signature of Registered Age	ent	Date	

OFFICERS AND DIRECTORS:

Title: DF

Name: MORRISON, JOHN T

Address: 1612 NW BOCA RATON BLVD STE 8

City-St-Zip: BOCA RATON, FL 33432

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: JOHN T. MORRISON DP 01/10/2011