2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G08031

FILED Mar 19, 2009 Secretary of State

Entity Name: JOAN THIEMANN, P.A. **Current Principal Place of Business: New Principal Place of Business:** JOAN THIEMANN 1611 BOWOOD ROAD JUNO ISLES, FL 33408 US **New Mailing Address: Current Mailing Address:** JOAN THIEMANN 1611 BOWOOD ROAD JUNO ISLES, FL 33408 US FEI Number: 59-2245830 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: THIEMANN, JOAN 1611 BOWÓOD ROAD JUNO ISLES, FL 33408 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PST () Delete Title: (X) Change () Addition THIEMANN, JOAN, THIEMANN, JOAN Name: 1611 BOWOOD RD 1611 BOWOOD RD Address: City-St-Zip: JUNO ISLES, FL 33408

Name: Address: City-St-Zip: JUNO ISLES, FL 33408

Title: (X) Delete

Name: THIEMANN, JOAN, 1611 BOWOOD RD Address: JUNO ISLES, FL 33408 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: JOAN THIEMANN **PSD** 03/19/2009