

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G11231

FILED
Jan 14, 2009
Secretary of State

Entity Name: THOMAS E. POPE, P. A.

Current Principal Place of Business:

% THOMAS E. POPE
7009 SHRIMP ROAD, UNIT 4
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

% THOMAS E. POPE
PO BOX 5567
KEY WEST, FL 33045

New Mailing Address:

FEI Number: 59-2213175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POPE, THOMAS E.
1015 FLAGLER AVE.
KEY WEST, FL 33040 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: POPE, THOMAS E,
Address: PO BOX 5567
City-St-Zip: KEY WEST, FL 33045

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: TOM POPE

DP

01/14/2009

Electronic Signature of Signing Officer or Director

Date