

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G73232

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: STEVEN H. MEZER, P.A.

## Current Principal Place of Business:

220 S FRANKLIN STREET  
TAMPA, FL 33602

## New Principal Place of Business:

1801 NORTH HIGHLAND AVENUE  
TAMPA, FL 33602

## Current Mailing Address:

PO BOX 3913  
TAMPA, FL 33601

## New Mailing Address:

FEI Number: 59-2368350

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MEZER, STEVEN H ESQ  
220 S FRANKLIN STREET  
TAMPA, FL 33602 US

## Name and Address of New Registered Agent:

MEZER, STEVEN H ESQ  
1801 NORTH HIGHLAND AVENUE  
TAMPA, FL 33602 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: STEVEN H. MEZER, PRESIDENT

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: MEZER, STEVEN H,  
Address: 220 SOUTH FRANKLIN STREET  
City-St-Zip: TAMPA, FL 33602

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: MEZER, STEVEN H,  
Address: 1801 NORTH HIGHLAND AVENUE  
City-St-Zip: TAMPA, FL 33602

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: STEVEN H. MEZER, PRESIDENT

PRES

04/30/2008

Electronic Signature of Signing Officer or Director

Date