## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE AND TYPE

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

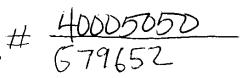
## 01-16-2008 90049 001 \*\*\*158.75 DOCUMENT # G79652 1. Entity Name E.C. DRIVER & ASSOCIATES, INC. 40002020 Principal Place of Business Mailing Address 150 E PALMETTO PARK RD. **600 MONTGOMERY STREET** STE. 400 25TH FLOOR BOCA RATON, FL 33432 SAN FRANCISCO, CA 94111 2. Principal Place of Business - No P.O. Box # Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01092008 CR2E034 (12/06) Cha-P City & State City & State 4. FEI Number Applied For 59-2375705 Not Applicable Ζiρ Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 Zip Code FL 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registerou arent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS 10 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE ☐ Addition NAME MILLER, HUGH NAME. STREET ADDRESS 3676 HARTSFIELD RD. STRUCT ADDRESS TALLAHASSEE, FL 32308 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change Addition ECHAGARRUA, MARIO NAME NAME STREET ADDRESS 7119 BEECH RIDGE TRAIL STREET ADDRESS CHY-ST-ZIP TALLAHASSEE, FL 32312 CITY-SI-ZIP TIME ☐ Delete TITLE. ☐ Change ■ Addition JANDEGIAN, GARY Y NAME NAME STREET ADDRESS 600 MONTGOMERY ST., 25TH FLR. STREET ADDRESS CITY-ST-7IP SAN FRANCISCO, CA 94111 CITY-ST-7IP BILE ☐ Delete THE ☐ Change ☐ Addition JONES, KRISTIN L NAME NAME STREET ADDRESS 600 MONTGOMERY ST. 25TH FL STREET ADDRESS CITY-ST-ZIP SAN FRANCISCO, CA 94111 CITY-ST-7P Delete TITLE TITLE Change Addition NAME CONTINUED ON ATTACHMENT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 truster impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered. Kristin L. Jones, Secretary 415-774-2700

FILED Jan 16, 2008 8:00 am

**Secretary of State** 

Daytime Phorie #

E.C. DRIVER ASSOCIATES, IN ATTACHMENT Document Number G79652



10. OFFI	CERS AND DIRECTORS		11. ADDIT	IONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE	V/CFO/D	Delete	TITLE	Change Addition
NAME	HICKS, H. THOMAS		NAME	
STREET ADDRESS	600 Montgomery Street, 25th Floor		STREET ADDRESS	
CITY-ST-ZIP	San Francisco, CA 94111		CITY-ST-ZIP	
TITLE	DΛ	Delete	TITLE	Change Addition
NAME	MASTERS, JOSEPH		NAME	
STREET ADDRESS	600 Montgomery Street, 25th Floor		STREET ADDRESS	
CITY-ST-ZIP	San Francisco, CA 94111		CITY-ST-ZIP	
TITLE	SrV	Delete	TITLE	Change Addition
NAME	GALLEN, ROBERT M.		NAME	
STREET ADDRESS	7650 W. Courtney Campbell Causeway	•	STREET ADDRESS	
CITY-ST-ZIP	Tampa, FL 33607		CITY-ST-ZIP	
TITLE		Delete	TITLE	Change Addition
NAME	PHILLIPS, JAMES		NAME	
STREET ADDRESS	7119 Beech Ridge Trail		STREET ADDRESS	
CITY-ST-ZIP	Tallahassee, FL 32312		CITY-ST-ZIP	
TITLE	V	Delete	TITLE	Change Addition
NAME	COSTA, LUIS A.		NAME	
STREET ADDRESS	150 E. Palmetto Park Road		STREET ADDRESS	
CITY-ST-ZIP	Tallahassee, FL 33432		CITY-ST-ZIP	
TITLE	V	Delete	TITLE	Change Addition
NAME	MALDONADO, LUIS E.		NAME	
STREET ADDRESS	7119 Beech Ridge Trail		STREET ADDRESS	
CITY-ST-ZIP	Tallahassee, FL 32312		CITY-ST-ZIP	**************************************
TITLE	V/T	Delete	TITLE	Change Addition
NAME	RODGERS, JUDY		NAME	
STREET ADDRESS	600 Montgomery Street, 25th Floor		STREET ADDRESS	
CITY-ST-ZIP	San Francisco, CA 94111		CITY-ST-ZIP	
TITLE	SrV	Delete	TITLE	SrV/CONTROLLER X Change Addition
NAME	LEAHY, MARTIN		NAME	
STREET ADDRESS	600 Montgomery Street, 25th Floor		STREET ADDRESS	1
CITY-ST-ZIP	San Francisco, CA 94111		CITY-ST-ZIP	
TITLE	AS	Delete	TITLE	Change Addition
NAME	COFFMAN, EVELYN V.		NAME	
STREET ADDRESS	600 Montgomery Street, 25th Floor		STREET ADDRESS	
CITY-ST-ZIP	San Francisco, CA 94111		CITY-ST-ZIP	