

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G86073

FILED  
Apr 24, 2008  
Secretary of State

Entity Name: RAYMOND AND ASSOCIATES, P.A.

**Current Principal Place of Business:**

917 11TH ST  
PALM HARBOR, FL 34683 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 579  
PALM HARBOR, FL 346820579 US

**New Mailing Address:**

FEI Number: 59-2403501

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RAYMOND, ALEXANDER P PRES  
2279 RANCHETTE DRIVE  
DUNEDIN, FL 34698 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: ST ( ) Delete  
Name: EMSLIE, THEONE H TST  
Address: 8330 REDFIELD DRIVE  
City-St-Zip: PORT RICHEY, FL 34668

Title: PD ( ) Delete  
Name: RAYMOND, ALEXANDER P.  
Address: 2279 RANCHETTE DR.  
City-St-Zip: DUNEDIN, FL 34698

Title: VP ( ) Delete  
Name: R, NELSON SIMPSON  
Address: 1406 12TH STREET  
City-St-Zip: PALM HARBOR, FL 34683

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: THEONE HAYDEN EMSLIE

TST

04/24/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date