2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G94042

Entity Name: SCRUGGS & CARMICHAEL, P.A.

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: ONE SOUTHEAST FIRST AVENUE GAINESVILLE, FL 32601 **Current Mailing Address: New Mailing Address:** ONE SOUTHEAST FIRST AVENUE GAINESVILLE, FL 32601 FEI Number: 59-2391595 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: CUSHMAN ESQ, STAN CUSHMAN, STAN ESQ ONE SOUTHEAST FIRST AVENUE ONE SOUTHEAST FIRST AVENUE GAINESVILLE, FL 32601 GAINESVILLE, FL 32601 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: STAN CUSHMAN 04/21/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition CUSHMAN, STAN Name: Name: ONE SOUTHEAST FIRST AVE Address: Address: City-St-Zip: GAINESVILLE, FL City-St-Zip: Title: Title: () Delete () Change () Addition DELANEY, PHILIP A. Name: Name: ONE SOUTHEAST FIRST AVE Address: Address: City-St-Zip: GAINESVILLE, FL City-St-Zip: Title: Title: () Delete () Change () Addition STINSON, JOHN S Name: Name: ONE SE FIRST AVENUE Address: Address: City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: Title: () Delete Title: () Change () Addition LARCHE, JAMES G JR. Name: Name: Address: ONE SOUTHEAST FIRST AVE. Address: City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: Title: () Delete Title: () Change () Addition BRASWELL, JEFFERSON M Name: Name: ONE SE 1ST AVE Address: Address: City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: Title: () Delete Title: () Change () Addition SAIER, FRANK P Name: Name: ONE SOUTHEAST FIRST AVE. Address: Address: City-St-Zip: City-St-Zip: GAINESVILLE, FL 32601

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: STAN CUSHMAN MR. 04/21/2009