

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H05061

FILED
Jan 04, 2008
Secretary of State

Entity Name: MICHAEL T. BURNS, P.A.

Current Principal Place of Business:

100 WALLACE AVENUE, SUITE 255
SARASOTA, FL 34237

New Principal Place of Business:

100 WALLACE AVENUE
SUITE 255
SARASOTA, FL 34237

Current Mailing Address:

100 WALLACE AVENUE, SUITE 255
SARASOTA, FL 34237

New Mailing Address:

100 WALLACE AVENUE
SUITE 255
SARASOTA, FL 34237

FEI Number: 59-2426654

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNS, MICHAEL T.
100 WALLACE AVE., #255
SARASOTA, FL 34237 US

Name and Address of New Registered Agent:

BURNS, MICHAEL T.
100 WALLACE AVENUE
SUITE 255
SARASOTA, FL 34237 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:

01/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BURNS, MICHAEL T.,
Address: 100 WALLACE AVE., #255
City-St-Zip: SARASOTA, FL 34237 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BURNS, MICHAEL T.,
Address: 100 WALLACE AVENUE, SUITE 255
City-St-Zip: SARASOTA, FL 34237 US

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: MICHAEL T. BURNS

DP

01/04/2008

Electronic Signature of Signing Officer or Director

Date