

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H10863

FILED
Jan 21, 2009
Secretary of State

Entity Name: BOB MORRIS AND ASSOCIATES INC.

Current Principal Place of Business:

4907 BROADWAY AVE W
ESTERO, FL 33928

New Principal Place of Business:

Current Mailing Address:

4907 BROADWAY AVE W
ESTERO, FL 33928

New Mailing Address:

FEI Number: 59-2427342

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORBIN, DONALD K., ESQUIRE
727 NE THIRD AVENUE
SUITE 301
FORT LAUDERDALE, FL 33304 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: PD () Delete
Name: MORRIS, BOB,
Address: 4907 BROADWAY AVE W
City-St-Zip: ESTERO, FL 33928

Title: VD () Delete
Name: MORRIS, LEONARD CARL,
Address: 4907 BROADWAY AVE W
City-St-Zip: ESTERO, FL 33928

Title: STD () Delete
Name: MORRIS, CARLA
Address: 4907 BROADWAY AVE W
City-St-Zip: ESTERO, FL 33928

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: BOB MORRIS

PD

01/21/2009

Electronic Signature of Signing Officer or Director

Date