

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H23159

FILED  
Apr 17, 2008  
Secretary of State

Entity Name: ROBERT TISON AND ASSOCIATES, INC.

## Current Principal Place of Business:

8000 ARLINGTON EXPRESSWAY  
STE 113  
JACKSONVILLE, FL 32211 US

## Current Mailing Address:

8000 ARLINGTON EXPRESSWAY  
STE 113  
JACKSONVILLE, FL 32211 US

## New Principal Place of Business:

12341 YELLOW BLUFF RD  
STE 2  
JACKSONVILLE, FL 32226 US

## New Mailing Address:

12341 YELLOW BLUFF RD  
STE 2  
JACKSONVILLE, FL 32226 US

FEI Number: 59-2445309

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TISON, ROBERT  
8000 ARLINGTON EXPRESSWAY  
STE 113  
JACKSONVILLE, FL 32211 US

## Name and Address of New Registered Agent:

TISON, ROBERT  
12341 YELLOW BLUFF RD  
STE 2  
JACKSONVILLE, FL 32226 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:

04/17/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: TISON, ROBERT,  
Address: 8000 ARLINGTON EXPRESSWAY, STE 113  
City-St-Zip: JACKSONVILLE, FL

Title: S ( ) Delete  
Name: TISON, SHARON C  
Address: 8000 ARLINGTON EXPRESSWAY, STE 113  
City-St-Zip: JACKSONVILLE, FL 32211

Title: VP ( ) Delete  
Name: JOHNS, LORIE  
Address: 8000 ARLINGTON EXPRESSWAY  
City-St-Zip: JACKSONVILLE, FL 32211 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: TISON, ROBERT,  
Address: 12341 YELLOW BLUFF RD #2  
City-St-Zip: JACKSONVILLE, FL 32211

Title: S (X) Change ( ) Addition  
Name: TISON, SHARON C  
Address: 12341 YELLOW BLUFF RD #2  
City-St-Zip: JACKSONVILLE, FL 32226

Title: VP (X) Change ( ) Addition  
Name: JOHNS, LORIE  
Address: 12341 YELLOW BLUFF RD #2  
City-St-Zip: JACKSONVILLE, FL 32226 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: LORIE JOHNS

VP

04/17/2008

Electronic Signature of Signing Officer or Director

Date