

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H35689

FILED
Jan 13, 2009
Secretary of State

Entity Name: PATRICE B. MORRISON, P.A.

Current Principal Place of Business:

1300 CLINTON SQUARE
ROCHESTER, NY 146041792

New Principal Place of Business:

1100 CLINTON SQUARE
ROCHESTER, NY 146041792

Current Mailing Address:

CLINTON SQUARE,
P O BOX 31051
ROCHESTER, NY 146031051

New Mailing Address:

1100 CLINTON SQUARE
ROCHESTER, NY 146041792

FEI Number: 59-2473450

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAN METER, CAROLYN
5845 URDEA RD
JUPITER, FL 33458 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: DPS () Delete
Name: MORRISON, PATRICE B.,
Address: 1100 CLINTON SQ
City-St-Zip: ROCHESTER, NY 14604

Title: T () Delete
Name: MORRISON, WILLIAM BR, IAN
Address: 54 MEADOW COVE ROAD
City-St-Zip: PITTSFORD, NY 14534

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: MORRISON, PATRICE B.,
Address: 1100 CLINTON SQUARE
City-St-Zip: ROCHESTER, NY 146041792

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: PATRICE B. MORRISON

DPS

01/13/2009

Electronic Signature of Signing Officer or Director

Date