## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H45437

Entity Name: MILLER SKINNER & JOLLY P.A.

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O CARLA MILLER 4417 BEACH BOULEVARD

4417 BEACH BLVD. SUITE 300 SUITE 300 JACKSONVILLE, FL 32207 SUITE 300 JACKSONVILLE, FL 32207

Current Mailing Address: New Mailing Address:

C/O CARLA MILLER 4417 BEACH BOULEVARD 4417 BEACH BLVD. SUITE 300 SUITE 300

JACKSONVILLE, FL 32207 JACKSONVILLE, FL 32207

FEI Number: 59-2513154 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:

MILLER, CARLA D VP
4417 BEACH BLVD. SUITE 300
JACKSONVILLE, FL 32207 US

SKINNER, HOWARD W
4417 BEACH BOULEVARD
SUITE 300

ACKSONVILLE, FL 32207 US SUITE 300 JACKSONVILLE, FL 32207 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: HOWARD W. SKINNER 04/28/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 MILLER, CARLA,
 Name:
 SKINNER, HOWARD W

 Address:
 4417 BEACH BLVD. SUITE 300
 Address:
 4417 BEACH BLVD. SUITE 300

 City-St-Zip:
 JACKSONVILLE, FL 32207
 City-St-Zip:
 JACKSONVILLE, FL 32207

Title: DP ( ) Delete Title: S (X) Change ( ) Addition

Name: SKINNER, HOWARD W Name: JOLLY, JOHN R

 Address:
 4417 BEACH BLVD. SUITE 300
 Address:
 4417 BEACH BLVD. SUITE 300

 City-St-Zip:
 JACKSONVILLE, FL 32207
 City-St-Zip:
 JACKSONVILLE, FL 32207

Title: S (X) Delete Title: ( ) Change ( ) Addition

 Name:
 JOLLY, JOHN R
 Name:

 Address:
 4417 BEACH BLVD. SUITE 300
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32207
 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: HOWARD W. SKINNER P 04/28/2008