2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H64151

Entity Name: JACK M. ROSS, P.A.

FILED Apr 10, 2009 Secretary of State

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

204 W UNIVERSITY AVE 4046 W. NEWBERRY ROAD STE 4 GAINESVILLE, FL 32607

GAINESVILLE, FL 32601

Current Mailing Address: New Mailing Address:

204 W UNIVERSITY AVE 4046 W. NEWBERRY ROAD STE 4 GAINESVILLE, FL 32607 GAINESVILLE, FL 32601

FEI Number: 59-2644666 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:

ROSS, JACK M.
204 W UNIVERSITY AVE
STE 4
GAINESVILLE, FL 32601 US
ROSS, JACK M.
4046 W. NEWBERRY ROAD
GAINESVILLE, FL 32607 U

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: 04/10/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: ROSS, JACK M. Name: ROSS, JACK M.

 Address:
 204 W UNIVERSITY AVE, #4
 Address:
 4046 W. NEWBERRY ROAD

 City-St-Zip:
 GAINESVILLE, FL 32601
 City-St-Zip:
 GAINESVILLE, FL 32607

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: JACK M. ROSS DP 04/10/2009