

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J31766

FILED
Apr 29, 2009
Secretary of State

Entity Name: MANEY, DAMSKER, JONES, KIELY & KUHLMAN, P.A.

Current Principal Place of Business:

606 E MADISON ST.
P O BOX 172009
TAMPA, FL 336727009

New Principal Place of Business:

606 E MADISON ST.
TAMPA, FL 336024029 US

Current Mailing Address:

606 E MADISON ST.
P O BOX 172009
TAMPA, FL 336727009

New Mailing Address:

P O BOX 172009
TAMPA, FL 336722009 US

FEI Number: 59-2720097

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAMSKER, LEE S.
606 E MADISON ST.
TAMPA, FL 336727009 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: DP () Delete
Name: MANEY, DAVID A.
Address: 1009 S OREGON
City-St-Zip: TAMPA, FL

Title: VSTD () Delete
Name: DAMSKER, LEE S.
Address: 4706 W HERON LN
City-St-Zip: TAMPA, FL

Title: DS () Delete
Name: JONES, KAREN L
Address: 1009 S. OREGON STREET
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: KUHLMAN, PATRICIA F
Address: 4131 CARROLWOOD VILLAGE DR
City-St-Zip: TAMPA, FL 33624

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:

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: LEE S DAMSKER

VSTD

04/29/2009

Electronic Signature of Signing Officer or Director

Date