

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K08409

FILED
Feb 23, 2009
Secretary of State

Entity Name: SAEVA, ROUSSELLE & STINE, P.A.

Current Principal Place of Business:

601 WEST SWANN AVE., STE B
TAMPA, FL 33606

New Principal Place of Business:

600 N. WILLOW AVENUE
SUITE 102
TAMPA, FL 33606

Current Mailing Address:

601 WEST SWANN AVE., STE B
TAMPA, FL 33606

New Mailing Address:

600 N. WILLOW AVENUE
SUITE 102
TAMPA, FL 33606

FEI Number: 59-2862976

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAIEVA, THOMAS
601 WEST SWANN AVE., STE B
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

SAIEVA, THOMAS
600 N. WILLOW AVENUE
SUITE 201
TAMPA, FL 33606 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:

02/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROUSSELLE, PAULA WAL, SH
Address: 601 WEST SWANN AVENUE STE B
City-St-Zip: TAMPA, FL 33606

Title: VT () Delete
Name: SAEVA, TOM,
Address: 601 WEST SWANN AVENUE STE B
City-St-Zip: TAMPA, FL 33606

Title: S () Delete
Name: STINE, LESLEY
Address: 601 W SWANN AVE STE B
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROUSSELLE, PAULA WAL, SH
Address: 600 N. WILLOW AVENUE
City-St-Zip: TAMPA, FL 33606

Title: VT (X) Change () Addition
Name: SAEVA, TOM,
Address: 600 N. WILLOW AVENUE
City-St-Zip: TAMPA, FL 33606

Title: S (X) Change () Addition
Name: STINE, LESLEY
Address: 600 N. WILLOW AVENUE
City-St-Zip: TAMPA, FL 33606

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: LESLEY STINE

S

02/23/2009

Electronic Signature of Signing Officer or Director

Date