2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L53291

Entity Name: MITCHELL & COMPANY, CPA'S, P.A.

FILED Jan 06, 2009 Secretary of State

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

14502 N DALE MABRY

SUITE 334 SUITE 334 TAMPA, FL 33618 US TAMPA, FL 336182072 US

Current Mailing Address: New Mailing Address:

P.O. BOX 272599 TAMPA, FL 336882599

FEI Number: 59-2995040 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:

MITCHELL, CHERYL MITCHELL, CHERYL P
14502 N DALE MABRY, STE 334 14502 N DALE MABRY
TAMPA, FL 33618 US SUITE 334

TAMPA, FL 336182072 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: CHERYL MITCHELL 01/06/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S () Delete Title: PS (X) Change () Addition Name: MITCHELL, CHERYL CPA Name: MITCHELL, CHERYL PS Address: 14502 N DALE MABRY, STE 334

City-St-Zip: TAMPA, FL 33618 City-St-Zip: TAMPA, FL 336182072

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: CHERYL MITCHELL PRES 01/06/2009

Electronic Signature of Signing Officer or Director

Date