

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M79831

FILED
Apr 12, 2008
Secretary of State

Entity Name: LAW OFFICE'S OF GEOFFREY B. DOBSON, P.A.

Current Principal Place of Business:

93 ORANGE STREET
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

16 PALMETTO AVE.
ST. AUGUSTINE, FL 32080

Current Mailing Address:

93 ORANGE STREET
ST. AUGUSTINE, FL 32084

New Mailing Address:

P. O. BOX 3588
ST. AUGUSTINE, FL 32085

FEI Number: 59-2885890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOBSON, GEOFFREY B.
93 ORANGE STREET
ST. AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

DOBSON, GEOFFREY B.
16 PALMETTO AVE.
ST. AUGUSTINE, FL 32080 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: GEOFFREY B.DOBSON

04/12/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: DOBSON, GEOFFREY B PTD
Address: 93 ORANGE STREET
City-St-Zip: ST. AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: DOBSON, GEOFFREY B PTD
Address: 16 PALMETTO AVE.
City-St-Zip: ST. AUGUSTINE, FL 32080

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: GEOFFREY B. DOBSON

P

04/12/2008

Electronic Signature of Signing Officer or Director

Date