2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08406

Apr 24, 2008 Secretary of State

Entity Name: THE ACADEMY OF FLORIDA TRIAL LAWYERS, INC.

Current Principal Place of Business: New Principal Place of Business: 218 S. MONROE STREET TALLAHASSEE, FL 323011824 **Current Mailing Address: New Mailing Address:** 218 S. MONROE STREET TALLAHASSEE, FL 323011824 FEI Number: 59-2689373 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: CARRUTHERS, SCOTT 218 S MONROÉ STREET US TALLAHASSEE, FL 32301 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PSC (X) Change () Addition () Delete CARRUTHERS, SCOTT CARRUTHERS, SCOTT Name: Name: 218 S MONROE STREET Address: 218 S MONROE STREET Address: City-St-Zip: TALLAHASSEE, FL 32301 US City-St-Zip: TALLAHASSEE, FL 32301 US Title: VCD () Delete Title: (X) Change () Addition PETOSA, FRANK Name: PETOSA, FRANK Name: Address: 7251 W PALMETTO PARK RD #206 Address: 7251 W PALMETTO PARK RD #206 City-St-Zip: BOCA RATON, FL 33433 US City-St-Zip: BOCA RATON, FL 33433 US Title: () Delete Title: (X) Change () Addition ZEBERSKY, EDWARD EDWARDS, TOM Name: Name: 4000 HOLLYWOOD BLVD. #400 NORTH 501 RIVERSIDE AVENUE, SUITE 601 Address: Address: City-St-Zip: HOLLYWOOD, FL 33021 US City-St-Zip: JACKSONVILLE, FL 32202 US Title: () Delete Title: VCT () Change (X) Addition Name: Name: HAGGARD, MICHAEL Address: Address: 330 ALHAMBRA CIRCLE City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134 US Title: () Delete Title: () Change (X) Addition NEWSOME, RICHARD Name: Name: 20 N. ORANGE AVENUE Address: Address: ORLANDO, FL 32801 US City-St-Zip: 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SCOTT CARRUTHERS PS 04/24/2008