

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000029185

FILED
Apr 19, 2007
Secretary of State

Entity Name: LAW OFFICE OF SANDRA MAYS, P.A.

Current Principal Place of Business:

220 JOHN KNOX RD.
SUITE 1B
TALLAHASSEE, FL 32303 US

New Principal Place of Business:

2102 MONTICELLO DRIVE
TALLAHASSEE, FL 32303 US

Current Mailing Address:

220 JOHN KNOX RD.
SUITE 1B
TALLAHASSEE, FL 32303 US

New Mailing Address:

2102 MONTICELLO DRIVE
TALLAHASSEE, FL 32303 US

FEI Number: 59-3635888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAYS, SANDRA H
220 JOHN KNOX RD.
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

MAYS, SANDRA H
2102 MONTICELLO DRIVE
TALLAHASSEE, FL 32303 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: SANDRA H. MAYS

04/19/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MAYS, SANDRA
Address: 2102 MONTICELLO DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MAYS, SANDRA
Address: 2102 MONTICELLO DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

I hereby certify that the information supplied with this filing does not qualify for the 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: SANDRA H. MAYS

PRES

04/19/2007

Electronic Signature of Signing Officer or Director

Date