2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000055381

Entity Name: MICHAEL R. FITZMAURICE, INC.

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
210 BRAN LAKE PAR	IT RD. RK, FL 33403			
Current Mailing Address:			New Mailing Address:	
210 BRAN LAKE PAR	IT RD. RK, FL 33403			
FEI Number	: 65-1003598	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:				
FITZMAURICE, MICHAEL R				
210 BRANT RD. LAKE PARK, FL 33403 US		US		
	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,
SIGNATU	RE:			
	Electron	ic Signature of Registered Age	ent	Date
Election Car	mpaign Financing	Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	P ()	Delete	Title: (() Change () Addition
Name:	FITZMAURICE,		Name:	
Address: City-St-Zip:	210 BRANT RD. LAKE PARK, FL		Address: City-St-Zip:	
City-St-Zip.	LAKE FARK, FL	33403	City-St-Zip.	
Title:	V ()	Delete	Title: (() Change () Addition
Name:	FITZMAURICE,	WILLIAM R	Name:	
Address:	210 BRANT RD.		Address:	
City-St-Zip:	LAKE PARK, FL	33403	City-St-Zip:	
Title:	s (X)	Delete	Title:	() Change () Addition
Name:	RAMBACK, ROE		Name:	()
Address:	210 BRANT RD.		Address:	
City-St-Zip:	LAKE PARK, FL	33403	City-St-Zip:	
Title:	T (X)	Delete	Title:	() Change () Addition
Name:	RAMBO, SHARI	55.5.5	Name:	() Sharigo () Madition
Address:	210 BRANT RD.		Address:	
City-St-Zip:	LAKE PARK, FL		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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL R. FITZMAURICE P 04/28/2008