2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2009
Secretary of State

DOCUMENT# P01000026879

Entity Name: LAW OFFICE OF FRANK DIGIACOMO, ESQUIRE, P.A.

Current Principal Place of Business:

2440 SE FEDERAL HWY
SUITE D
STUART, FL 34994

New Principal Place of Business:

529 SE PALM BEACH RD
SUITE 101
STUART, FL 34994

Current Mailing Address:

2440 SE FEDERAL HWY
SUITE D
STUART, FL 34994

New Mailing Address:

529 SE PALM BEACH RD
SUITE 101
STUART, FL 34994

FEI Number: 65-1086749 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DIGIACOMO, FRANK
2440 SE FEDERAL HWY
SUITE D
STUART, FL 34994 US

Name and Address of New Registered Agent:

DIGIACOMO, FRANK
529 SE PALM BEACH RD
SUITE 101
STUART, FL 34994 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: 01/08/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPVS ( ) Delete
Name: DIGIACOMO, FRANK
Address: 2440 SE FEDERAL STE D
City-St-Zip: STUART, FL 34994

Title: T ( ) Delete
Name: DIGIACOMO, FRANK
Address: 2440 SE FEDERAL HWY STE D
City-St-Zip: STUART, FL 34994

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVS (X) Change ( ) Addition
Name: DIGIACOMO, FRANK
Address: 529 SE PALM BEACH RD-SUITE 101
City-St-Zip: STUART, FL 34994

Title: T (X) Change ( ) Addition
Name: DIGIACOMO, FRANK
Address: 529 SE PALM BEACH RD-SUITE 101
City-St-Zip: STUART, FL 34994

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: FRANK DIGIACOMO MR 01/08/2009
Electronic Signature of Signing Officer or Director — Date