2008 FOR PROFIT CORPORATION

ANNUAL REPORT **FILED** Apr 17, 2008 08:00 Al Secretary of State DOCUMENT # P02000007784 1. Entity Name CHERYL BURNETT, P.A. Principal Place of Business Mailing Address 14186 EASTMOUNT RD 14186 EASTMOUNT RD SPRING HILL, FL 34609 SPRING HILL, FL 34609 02252008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 90-0003006 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BURNETT, CHERYL DO NOT WRITE 14186 EASTMOUNT RD SPRING HILL, FL 34609 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE BURNETT, CHERYL NAME STREET ADDRESS 14186 EASTMOUNT RD CITY-ST-ZIP SPRING HILL, FL 34609 TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if