

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000011179

FILED
Apr 23, 2007
Secretary of State

Entity Name: THE LAW OFFICE OF CYNTHIA TOLBERT, P.A.

Current Principal Place of Business:

THE CASCADES STE 104
1515 EAST SILVER SPRINGS BLVD
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

LAW OFFICE OF CYNTHIA TOLBERT, P.A.,
P.O. BOX 1587
OCALA, FL 34478

New Mailing Address:

FEI Number: 30-0043023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOLBERT, CYNTHIA
6911 SE 54TH STREET
OCALA, FL 34472 US

Name and Address of New Registered Agent:

TOLBERT, CYNTHIA
13550 NE 110TH STREET
FORT MCCOY, FL 32134 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: CYNTHIA TOLBERT

04/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: TOLBERT, CYNTHIA
Address: 6911 SE 54TH STREET
City-St-Zip: OCALA, FL 34472

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: TOLBERT, CYNTHIA E
Address: P.O. BOX 1587
City-St-Zip: OCALA, FL 34478

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: CYNTHIA TOLBERT

CEO

04/23/2007

Electronic Signature of Signing Officer or Director

Date