2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000018967

Entity Name: THE LUDWIG GROUP, P.A.

5403 LIPSCOMB ST, SOUTH

TAMPA, FL 33611

Address:

City-St-Zip:

FILED Apr 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5403 LIPSCOMB ST, SOUTH TAMPA, FL 33611 **Current Mailing Address: New Mailing Address:** 5403 LIPSCOMB ST, SOUTH TAMPA, FL 33611 FEI Number: 02-0553628 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: BURDEN, BRIAN A ESQ. LUDWIG, JAMES G 5403 LIPSCOMBS STREET SOUTH BRIAN A. BURDEN, P.A. 120 S. WILLOW AVE TAMPA, FL 33611 US TAMPA, FL 33606 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: JAMES LUDWIG 04/01/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition LUDWIG, JAMES G Name: Name: 5403 LIPSCOMB ST, SOUTH Address: Address: City-St-Zip: TAMPA, FL 33611 City-St-Zip: () Delete Title: DST Title: () Change () Addition Name: LUDWIG. DANA R Name:

Address:

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: JAMES G LUDWIG P 04/01/2008