2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000087278

Entity Name: MORRIS TAX ADVISORY GROUP INC.

FILED Mar 03, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Julicut i illicipui i luce di Busiliess.	New i interput i luce of Business.

11920 SHELDON RD STE D 9410 TREETOPS LAKE ROAD

TAMPA, FL 33626 TAMPA, FL 33626

Current Mailing Address: New Mailing Address:

11920 SHELDON RD STE D 9410 TREETOPS LAKE ROAD

TAMPA, FL 33626 TAMPA, FL 33626

FEI Number: 55-0792662 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:

LIVINGSTON, LAWRENCE J 11920 SHELDON RD STE D TAMPA, FL 33626 US HAWF, SHERRY A 9410 TREETOPS LAKE ROAD TAMPA, FL 33626 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

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: SHERRY A HAWF 03/03/2009

Electronic Signature of Registered Agent Date

Title:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete

Name:MORRIS, SANDY OName:MORRIS, SANDEVA OAddress:9410 TREE TOPS LAKE RD. STE DAddress:9410 TREE TOPS LAKE RD.

City-St-Zip: TAMPA, FL 33626 City-St-Zip: TAMPA, FL 33626

Title: () Delete Title: DIR () Change (X) Addition

 Name:
 Name:
 HAWF, SHERRY A

 Address:
 Address:
 9410 TREE TOPS LAKE RD

 City-St-Zip:
 City-St-Zip:
 TAMPA, FL 33626

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: SANDEVA O MORRIS PRES 03/03/2009