# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 26, 2008**
**Secretary of State**

DOCUMENT# P02000104352

**Entity Name:** GALE F. COONEY, D.C., PA

**Current Principal Place of Business:**

2410 LISENBY AVE
PANAMA CITY, FL 32405

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 7
PANAMA CITY, FL 32402

**New Mailing Address:**

**FEI Number: 05-0531079** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COONEY, GALE F DC
6901 N. LAGOON DR. #9
PANAMA CITY, FL 32408 US

**Name and Address of New Registered Agent:**

COONEY, GALE F DC
2410 LISENBY AVENUE
PANAMA CITY, FL 32405 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: 03/26/2008
Electronic Signature of Registered Agent — Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete
Name: COONEY, GALE F DC
Address: 6901 N. LAGOON DR. #9
City-St-Zip: PANAMA CITY, FL 32408

Title: VD ( ) Delete
Name: COONEY, GALE F DC
Address: 6901 N. LAGOON DR. #9
City-St-Zip: PANAMA CITY, FL 32408

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PST (X) Change ( ) Addition
Name: COONEY, GALE F DC
Address: 2410 LISENBY AVENUE
City-St-Zip: PANAMA CITY, FL 32405

Title: VD (X) Change ( ) Addition
Name: COONEY, GALE F DC
Address: 2410 LISENBY AVENUE
City-St-Zip: PANAMA CITY, FL 32405

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: GALE F. COONEY DC, PA PST 03/26/2008
Electronic Signature of Signing Officer or Director — Date