

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000119934

FILED
Apr 21, 2009
Secretary of State

Entity Name: NICK FICARROTTA, JR. P. A.

Current Principal Place of Business:

238 E DAVIS BLVD
SUITE 215
TAMPA, FL 33606 US

New Principal Place of Business:

505 SOUTH MAGNOLIA AVE.
TAMPA, FL 33606 US

Current Mailing Address:

238 E DAVIS BLVD
SUITE 215
TAMPA, FL 33606 US

New Mailing Address:

505 SOUTH MAGNOLIA AVE.
TAMPA, FL 33606 US

FEI Number: 05-0540141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FICARROTTA, NICK JR.
238 E DAVIS BLVD
SUITE 215
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

FICARROTTA JR., NICK PTS
505 SOUTH MAGNOLIA AVE.
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: NICK FICARROTTA JR.

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTS () Delete
Name: FICARROTTA, NICK JR
Address: 238 E DAVIS BLVD SUITE 215
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: FICARROTTA JR., NICK
Address: 505 SOUTH MAGNOLIA AVE.
City-St-Zip: TAMPA, FL 33606 US

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: NICK FICARROTTA JR.

PRES

04/21/2009

Electronic Signature of Signing Officer or Director

Date