

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000131914

Entity Name: JOHNNY DEVINE, P.A.

FILED
Mar 25, 2009
Secretary of State

Current Principal Place of Business:

1882 CAPITAL CIRCLE N.E.
205
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

905 PARKVIEW DRIVE
TALLAHASSEE, FL 32311 US

Current Mailing Address:

1882 CAPITAL CIRCLE N.E.
205
TALLAHASSEE, FL 32308 US

New Mailing Address:

905 PARKVIEW DRIVE
TALLAHASSEE, FL 32311 US

FEI Number: 48-1289736

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEVINE, JOHN P
1882 CAPITAL CIRCLE N.E.
205
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

DEVINE, JOHN P
905 PARKVIEW DRIVE
TALLAHASSEE, FL 32311 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:

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: DEVINE, JOHN P
Address: 1882 CAPITAL CIRCLE N.E. SUITE 205
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: DEVINE, JOHN P
Address: 905 PARKVIEW DRIVE
City-St-Zip: TALLAHASSEE, FL 32311

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: JOHN P. DEVINE

PRES

03/25/2009

Electronic Signature of Signing Officer or Director

Date