

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000005530

Entity Name: PHIL DERRY, P.A.

FILED  
Mar 21, 2009  
Secretary of State

## Current Principal Place of Business:

2311 SANTA BARBARA BLVD  
CAPE CORAL, FL 33991

## New Principal Place of Business:

## Current Mailing Address:

C/O JOHN M. WICKER, P.A.  
PO DRAWER 60205  
FORT MYERS, FL 33906 US

## New Mailing Address:

FEI Number: 02-0665430      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WICKER, P.A., JOHN M  
12670 NEW BRITTANY BLVD., SUITE 101  
FORT MYERS, FL 33907 US

## Name and Address of New Registered Agent:

WICKER, JOHN M  
12670 NEW BRITTANY BLVD., SUITE 101  
FORT MYERS, FL 33907 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: JOHN M. WICKER

03/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DERRY, PHIL  
Address: 2683 SUNSET LAKE DRIVE  
City-St-Zip: CAPE CORAL, FL 33909

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition  
Name: DERRY, PHIL  
Address: 12446 MCGREGOR WOODS CIRCLE  
City-St-Zip: FORT MYERS, FL 33908

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: PHIL DERRY

DPST

03/21/2009

Electronic Signature of Signing Officer or Director

Date