

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000017323

FILED
Apr 29, 2008
Secretary of State

Entity Name: MAUREEN B. BARBER, P.A.

Current Principal Place of Business:

8076 MURANO CIR
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

1609 NATURE COURT
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

8076 MURANO CIR
PALM BEACH GARDENS, FL 33418

New Mailing Address:

1609 NATURE COURT
PALM BEACH GARDENS, FL 33410

FEI Number: 05-0555898

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARBER, MAUREEN B
8076 MURANO CIR
PALM BEACH GARDENS, FL 33418 US

Name and Address of New Registered Agent:

BARBER, MAUREEN B
1609 NATURE COURT
PALM BEACH GARDENS, FL 33410 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: MAUREEN BARBER

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BARBER, MAUREEN B
Address: 8076 MURANO CIR
City-St-Zip: PALM BEACH GARDENS, FL 33418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BARBER, MAUREEN B
Address: 1609 NATURE COURT
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: MAUREEN BARBER

PRES

04/29/2008

Electronic Signature of Signing Officer or Director

Date