2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000019401

Address:

City-St-Zip:

Entity Name: SILVER, LEVY, FELDMAN & BASS, P.A.

FILED Jan 04, 2008 Secretary of State

Current Principal Place of Business:			New Prin	New Principal Place of Business:		
	JSTRALIAN AV ALM BEACH, F	'ENUE, SUITE 800 L 33401	SUITE 800	500 S. AUSTRALIAN AVENUE SUITE 800 WEST PALM BEACH, FL 33401		
Current N	Mailing Addre	ss:	New Mail	New Mailing Address:		
500 S. AUSTRALIAN AVENUE, SUITE 800 WEST PALM BEACH, FL 33401			SUITE 800	500 S. AUSTRALIAN AVENUE SUITE 800 WEST PALM BEACH, FL 33401		
FEI Number	r: 45-0501729	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of S	Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
WEST PA	ALM BEACH, F e named entity te of Florida.	PAILE, SUITE 800 L 33401 US submits this statement for the	e purpose of changing	ts registered office or registe	ered agent, or both,	
Electronic Signature of Registered Age			gent	Date		
Election Ca	ımpaign Financir	ng Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	SILVER, SCOT 500 S. AUSTR) Delete IT A ALIAN AVENUE, SUITE 800 BEACH, FL 33401	Title: Name: Address: City-St-Zip:	()Change ()Ado	lition	
Title: Name: Address: City-St-Zip:	LEVY, JOSHU 1135 KANE CO) Delete A M DNCOURSE, 3RD FLOOR ISLANDS, FL 33154	Title: Name: Address: City-St-Zip:	VP (X) Change () Add LEVY, JOSHUA M 975 ARTHUR GODFREY ROAD MIAMI BEACH, FL 33140		
Title: Name: Address: City-St-Zip:	FELDMAN, MI 2701 N. ROCK	Y POINT DR. STE. 1000	Title: Name: Address: City-St-Zip:	()Change ()Ado	dition	
Title: Name:	T (BASS, AARON) Delete S	Title: Name:	() Change () Ado	lition	

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.

Address:

City-St-Zip:

SIGNATURE: SCOTT A. SILVER Ρ 01/04/2008

500 S. AUSTRALIAN AVENUE, SUITE 800

W. PALM BEACH, FL 33401