2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000099776

Entity Name: PENSACOLA RESEARCH CONSULTANTS, INC.

FILED Mar 12, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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5149 NORTH 9TH AVENUE 5149 NORTH 9TH AVENUE SUITE G27 SUITE 241 PENSACOLA, FL 32504 PENSACOLA, FL 32504

Current Mailing Address: New Mailing Address:

5149 NORTH 9TH AVENUE 5149 NORTH 9TH AVENUE SUITE G27 SUITE 241 PENSACOLA, FL 32504 PENSACOLA, FL 32504

FEI Number: 51-0481579 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LAPOINTE, THEODORE E III
5149 NORTH 9TH AVENUE
SUITE G27
PENSACOLA, FL 32504 US

LAPOINTE, THEODORE E III
5149 NORTH 9TH AVENUE
SUITE 241
PENSACOLA, FL 32504 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: 03/12/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C () Delete Title: C (X) Change () Addition Name: PHILLIPS, DAVID E Name: PHILLIPS, DAVID E

Address: 5149 NORTH 9TH AVENUE, G27 Address: 5149 NORTH 9TH AVENUE, 241
City-St-Zip: PENSACOLA, FL 32503 City-St-Zip: PENSACOLA, FL 32503

Title: () Delete Title: (X) Change () Addition LAPOINTE. THEODORE E III Name: LAPOINTE. THEODORE E III Name: 5149 NORTH 9TH AVENUE, G27 5149 NORTH 9TH AVENUE, 241 Address: Address: PENSACOLA, FL 32503 PENSACOLA, FL 32503 City-St-Zip: City-St-Zip:

Title: V () Delete Title: V (X) Change () Addition

Name: ELLIS, MICHAEL A
Address: 5149 NORTH 9TH AVENUE, G27
Address: 5149 NORTH 9TH AVENUE, G27
Address: 5149 NORTH 9TH AVENUE, 241

City-St-Zip: PENSACOLA, FL 32503 City-St-Zip: PENSACOLA, FL 32503

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: MICHAEL ELLIS V 03/12/2008