

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000109253

FILED
Mar 15, 2009
Secretary of State

Entity Name: CHARLES L. CROMER, C.P.A., P.A.

Current Principal Place of Business:

225 WATER STREET
1200
JACKSONVILLE, FL 32202 US

Current Mailing Address:

225 WATER STREET
1200
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

1301 RIVERPLACE BOULEVARD
2400
JACKSONVILLE, FL 32207 US

New Mailing Address:

1301 RIVERPLACE BOULEVARD
2400
JACKSONVILLE, FL 32207 US

FEI Number: 20-0277595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEEKIN, MARK ESQ.
4540 SOUTHSIDE BOULEVARD
SUITE 702
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

HEEKIN, MARK ESQ.
11512 LAKE MEAD AVENUE
BUILDING 100
JACKSONVILLE, FL 32256 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:

03/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P, D () Delete
Name: CROMER, CHARLES L
Address: 225 WATER STREET, SUITE 1200
City-St-Zip: JACKSONVILLE, FL 32202 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHARLES L CROMER

PRES

03/15/2009

Electronic Signature of Signing Officer or Director

Date