## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000110151

FILED Apr 05, 2008 Secretary of State

Entity Name: EMILY HEATH CONELY, TAX AND ACCOUNTING SERVICES, P.A.

**Current Principal Place of Business: New Principal Place of Business:** 103 SEINE CT. WARNER ROBINS, GA 31088 **Current Mailing Address: New Mailing Address:** 103 SEINE CT WARNER ROBINS, GA 31088 FEI Number: 20-0432979 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: HEATH, WAYNE 3814 CHAMPION ROAD TITUSVILLE, FL 32796 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: PRFS (X) Change ( ) Addition CONELY, EMILY H PRES Name: Name: CONELY, EMILY H 103 SEINE CT. 103 SEINE CT. Address: Address: City-St-Zip: WARNER ROBINS, GA 31088 City-St-Zip: WARNER ROBINS, GA 31088 Title: Title: () Delete () Change () Addition CONELY, ANDY L SECRET Name: Name: Address: Address: 103 SEINE CT. WARNER ROBINS, GA 31088 City-St-Zip: 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: EMILY H CONELY PRES 04/05/2008