

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000119722

FILED
Mar 17, 2008
Secretary of State

Entity Name: GUILFORD, DRIGGERS & ASSOCIATES, INC.

Current Principal Place of Business:

522 1ST STE B
PORT ST. JOE, FL 32456 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 725
PORT SAINT JOE, FL 32457 US

New Mailing Address:

FEI Number: 56-2421345

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRIGGERS, THOMAS N
522 1ST ST
PORT ST. JOE, FL 32456 US

Name and Address of New Registered Agent:

DRIGGERS, THOMAS M
522 1ST ST
SUITE B
PORT ST. JOE, FL 32456 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: THOMAS M. DRIGGERS

03/17/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: DRIGGERS, THOMAS M
Address: 112 S. 36TH STREET
City-St-Zip: MEXICO BEACH, FL 32456 US

Title: VPD () Delete
Name: DRIGGERS, JACKIE A
Address: 112 S 36TH
City-St-Zip: MEXICO BEACH, FL 32410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: THOMAS M. DRIGGERS

PRES

03/17/2008

Electronic Signature of Signing Officer or Director

Date