2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000023741

Entity Name: LINDA W. HARGREAVES, P.A.

FILED Apr 26, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9019 C OTTER CREEK DRIVE 9600 MARKUS DRIVE CHARLOTTE, NC 28277 CHARLOTTE, NC 28227

Current Mailing Address: New Mailing Address:

PO BOX 77879 9600 MARKUS DRIVE CHARLOTTE, NC 28271 CHARLOTTE, NC 28227

FEI Number: 40-4621113 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:

HARGREAVES, LINDA W
9019 C OTTER CREEK DRIVE
CHARLOTTE, NC, FL 28277 US
HARGREAVES, LINDA W
9600 MARKUS
CHARLOTTE,, FL 28227 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: LINDA W. HARGREAVES 04/26/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 HARGREAVES, LINDA W
 Name:
 HARGREAVES, LINDA W

 Address:
 9019 C OTTER CREEK DRIVE
 Address:
 9600 MARKUS DRIVE

 City-St-Zip:
 CHARLOTTE, NC 28277
 City-St-Zip:
 CHARLOTTE, NC 28227

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: LINDA W. HARGREAVES D 04/26/2009