2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000089086

Entity Name: JO-ANN HOFFMANN P.A.

FILED Mar 05, 2009 Secretary of State

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

5960 NW BAYNARD DRIVE 7028 WILLOW PINE WAY PORT ST LUCIE, FL 34986 US PORT ST LUCIE, FL 34986 US

Current Mailing Address: New Mailing Address:

5960 NW BAYNARD DRIVE 7028 WILLOW PINE WAY PORT ST LUCIE, FL 34986 US PORT ST LUCIE, FL 34986 US

FEI Number: 20-1218821 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:

HOFFMANN, JOANN
5960 NW BAYNARD DRIVE
PORT ST LUCIE, FL 34986 US
HOFFMANN, JOANN
7028 WILLOW PINE WAY
PORT ST LUCIE, FL 34986 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: 03/05/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name:HOFFMANN, JOANNName:HOFFMANN, JOANNAddress:5960 NW BAYNARD DRIVEAddress:7028 WILLOW PINE WAYCity-St-Zip:PORT ST LUCIE, FL 34986 USCity-St-Zip:PORT ST LUCIE, FL 34986 US

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: JOANN HOFFMANN P 03/05/2009