

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000097249

Entity Name: ROSIER & COMPANY, INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

1882 CAPITAL CIR NE
SUITE 102
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 16375
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 20-1287022

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSIER, SHANNON
1882 CAPITAL CIR NE
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: ROSIER, SHANNON
Address: 1838-B JACLIF CT
City-St-Zip: TALLAHASSEE, FL 32308

Title: V () Delete
Name: ROSIER, ELA A
Address: 1838-B JACLIF CT
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROSIER, SHANNON
Address: 1882 CAPITAL CIR NE
City-St-Zip: TALLAHASSEE, FL 32308

Title: V (X) Change () Addition
Name: ROSIER, ELA A
Address: 1882 CAPITAL CIR NE
City-St-Zip: TALLAHASSEE, FL 32308

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: SHANNON ROSIER

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date