

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000112275

FILED
Feb 14, 2008
Secretary of State

Entity Name: FRENCH PROFESSIONAL MANAGEMENT, INC.

Current Principal Place of Business:

587 DOE COVE PLACE
APOPKA, FL 32703

New Principal Place of Business:

2803 PONKAN PINES DRIVE
APOPKA, FL 327012

Current Mailing Address:

587 DOE COVE PLACE
APOPKA, FL 32703

New Mailing Address:

2803 PONKAN PINES DRIVE
APOPKA, FL 32712

FEI Number: 05-0607272

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLES, BONNIE E
587 DOE COVE PLACE
APOPKA, FL 32703 US

Name and Address of New Registered Agent:

COLES, BONNIE E
2803 PONKAN PINES DRIVE
APOPKA, FL 32712 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:

02/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COLES, BONNIE E
Address: 587 DOE COVE PLACE
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: COLES, BONNIE E
Address: 2803 PONKAN PINES DRIVE
City-St-Zip: APOPKA, FL 32712

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: BONNIE E. COLES

PRES

02/14/2008

Electronic Signature of Signing Officer or Director

Date