2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000137105

Entity Name: THOMAS E. LAFFERTY, M.D., P.A.

FILED Apr 28, 2008 Secretary of State

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

3210 SW 33RD ROAD 40 SOUTHWEST 12TH STREET

102 C-101

OCALA, FL 34474 US OCALA, FL 34471 U

Current Mailing Address: New Mailing Address:

3210 SW 33RD ROAD P.O. BOX 129

102 OCALA, FL 34478 US

FEI Number: 20-1790671 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MIDGETT, DAVID E ESQ. 1805 SE 16TH AVE. 101 OCALA, FL 34471 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: LAFFERTY, THOMAS E Name: LAFFERTY, THOMAS E

Address: 3210 SW 33RD ROAD, 102 Address: 40 SOUTHWEST 12TH ST SUITE C101

City-St-Zip: OCALA, FL 34474 US City-St-Zip: OCALA, FL 34471 US

Title: S () Delete Title: () Change () Addition

 Name:
 LAFFERTY, CYNTHIA M
 Name:

 Address:
 2610 SE 14TH ST
 Address:

 City-St-Zip:
 OCALA, FL 34471 US
 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 E. LAFFERTY, M.D. PA P 04/28/2008