

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000170769

FILED
Mar 13, 2009
Secretary of State

Entity Name: JOHN ANTHONY LABONTE, PA

Current Principal Place of Business:

12422 23RD STREET E.
PARRISH, FL 34219

New Principal Place of Business:

Current Mailing Address:

12422 23RD STREET E.
PARRISH, FL 34219

New Mailing Address:

6260 N. LOCKWOOD RIDGE RD.
SARASOTA, FL 34243

FEI Number: 20-2046763

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LABONTE, JOHN
12422 23RD STREET E.
PARRISH, FL 34219 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: LABONTE, JOHN
Address: 12422 23RD STREET E.
City-St-Zip: PARRISH, FL 34219

Title: S () Delete
Name: LABONTE, JOHN
Address: 12422 23RD STREET E.
City-St-Zip: PARRISH, FL 34219

Title: T () Delete
Name: LABONTE, JOHN
Address: 12422 23RD STREET E.
City-St-Zip: PARRISH, FL 34219

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LABONTE, JOHN A PRES
Address: 12422 23RD STREET E.
City-St-Zip: PARRISH, FL 34219

Title: SECR (X) Change () Addition
Name: LABONTE, JOHN A SECR
Address: 12422 23RD STREET E.
City-St-Zip: PARRISH, FL 34219

Title: TRES (X) Change () Addition
Name: LABONTE, JOHN A TRES
Address: 12422 23RD STREET E.
City-St-Zip: PARRISH, FL 34219

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: JOHN ANTHONY LABONTE

PRES

03/13/2009

Electronic Signature of Signing Officer or Director

Date