2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000001394

1. Entity Name

1004 DREW ST

Principal Place of Business

CLEARWATER, FL 33755

TINNY, MEYER AND PICCARRETO, P.A.



Mailing Address

1004 DREW ST

CLEARWATER, FL 33755





DO NOT WRITE IN THIS SPACE

07072008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2073072

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and little if applicable

MEYER, L. KEITH JR. 1004 DREW ST CLEARWATER, FL 33755

DO NOT WRITE IN THIS SPACE

6. The above named entity submits this statement for the purpose of changing its rec	distered office or registered agent, or doth, in the State of Florida. I	am ramiliar with, and accept
the obligations of registered agent.		
and the same of th		
SIGNATURE		

(NOTE, Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00

Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Due by September 12, 2008 OFFICERS AND DIRECTORS 10. PΩ TITLE NAME TINNY, DONALD F STREET ADDRESS 1004 DREW ST CITY - ST - ZIP CLEARWATER, FL 33755 UHF PICCARRETO, KEVIN J NAME STREET ADDRESS 1004 DREW ST CITY-ST-ZIP CLEARWATER, FL 33755 TITLE NAME MEYER, L. KEITH JR STREET ADDRESS 1004 DREW ST. CITY-ST-7IP CLEARWATER, FL 33755 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP NAMÉ STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-7-08

(722) 463 2946

Daytime