2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 01, 2009
Secretary of State

DOCUMENT# P05000012707

Entity Name: ANDREW M. TIDWELL, P.A.

Current Principal Place of Business:

2337 CANAL DR
NICEVILLE, FL 32578

New Principal Place of Business:

240 FOXCHASE WAY
CRESTVIEW, FL 32536

Current Mailing Address:

PO BOX 831
NICEVILLE, FL 32578

New Mailing Address:

240 FOXCHASE WAY
CRESTVIEW, FL 32536

FEI Number: 20-2470945 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TIDWELL, ANDREW M
2337 CANAL DR.
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

TIDWELL, ANDREW M
240 FOXCHASE WAY
CRESTVIEW, FL 32536 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: 09/01/2009
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete
Name: TIDWELL, ANDREW M
Address: PO BOX 831
City-St-Zip: NICEVILLE, FL 32578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition
Name: TIDWELL, ANDREW M
Address: 240 FOXCHASE WAY
City-St-Zip: CRESTVIEW, FL 32536

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: ANDREW TIDWELL DPS 09/01/2009
Electronic Signature of Signing Officer or Director — Date