

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000026265

FILED
Mar 30, 2009
Secretary of State

Entity Name: BRUHN AND MOORE, ATTORNEYS AT LAW, P.A.

Current Principal Place of Business:

718 SW PORT ST. LUCIE BLVD
8
PORT ST LUCIE, FL 34953

New Principal Place of Business:

1109 DELAWARE AVE.
FORT PIERCE, FL 34950

Current Mailing Address:

718 SW PORT ST. LUCIE BLVD
8
PORT ST LUCIE, FL 34953

New Mailing Address:

1109 DELAWARE AVE.
FORT PIERCE, FL 34950

FEI Number: 20-2400657

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, ALBERT B
718 SW PORT ST LUCIE BLVD
SUITE 8
PORT ST LUCIE, FL 34953 US

Name and Address of New Registered Agent:

MOORE, ALBERT B
2384 SW FERN CIRCLE
PORT ST LUCIE, FL 34950 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: _____

03/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MOORE, ALBERT B
Address: 718 SW PORT ST. LUCIE BLVD, SUITE 8
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: D () Delete
Name: BRUHN, JOHN D
Address: 719 SW PORT ST. LUCIE BLVD, SUITE 8
City-St-Zip: PORT SAINT LUCIE, FL 34953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MOORE, ALBERT B
Address: 1109 DELAWARE AVE.
City-St-Zip: FORT PIERCE, FL 34950

Title: D (X) Change () Addition
Name: BRUHN, JOHN D
Address: 1109 DELAWARE AVE.
City-St-Zip: FORT PIERCE, FL 34950

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: ALBERT MOORE

DIR.

03/30/2009

Electronic Signature of Signing Officer or Director

Date