

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000027285

FILED
Apr 14, 2009
Secretary of State

Entity Name: LAW OFFICES OF MARIE COLEMAN WILSON, P.A.

Current Principal Place of Business:

2383 S. TAMIAMI TRAIL
SUITE A
VENICE, FL 34293

New Principal Place of Business:

2383 S. TAMIAMI TRAIL
SUITE E
VENICE, FL 34293

Current Mailing Address:

2383 S. TAMIAMI TRAIL
SUITE A
VENICE, FL 34293

New Mailing Address:

2383 S. TAMIAMI TRAIL
SUITE E
VENICE, FL 34293

FEI Number: 65-1243494

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, MARILYN M
2383 S. TAMIAMI TRAIL
SUITE A
VENICE, FL 34293 US

Name and Address of New Registered Agent:

WILSON, MARILYN M
2383 S. TAMIAMI TRAIL
SUITE E
VENICE, FL 34293 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:

04/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WILSON, MARILYN M
Address: 2383 S TAMIAMI TRAIL STE A
City-St-Zip: VENICE,, FL 34293

Title: S () Delete
Name: WILSON, MARILYN M
Address: 2383 S TAMIAMI TRAIL STE A
City-St-Zip: VENICE, FL 34293

Title: T () Delete
Name: WILSON, MARILYN M
Address: 2383 S TAMIAMI TRAIL STE A
City-St-Zip: VENICE, FL 34293

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILSON, MARILYN M
Address: 2383 S TAMIAMI TRAIL STE E
City-St-Zip: VENICE,, FL 34293

Title: S (X) Change () Addition
Name: WILSON, MARILYN M
Address: 2383 S TAMIAMI TRAIL STE E
City-St-Zip: VENICE, FL 34293

Title: T (X) Change () Addition
Name: WILSON, MARILYN M
Address: 2383 S TAMIAMI TRAIL STE E
City-St-Zip: VENICE, FL 34293

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: M. MARIE WILSON

PRES

04/14/2009

Electronic Signature of Signing Officer or Director

Date