2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000048089

Entity Name: MARK K CARD P.A.

FILED Jan 18, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2 OCEANS WEST BLVD. #1209 2 OCEANS WEST BLVD. #1809

DAYTONA BEACH SHORES, FL 32118 DAYTONA BEACH SHORES, FL 32118

Current Mailing Address: New Mailing Address:

2 OCEANS WEST BLVD. #1209 2 OCEANS WEST BLVD. #1809

DAYTONA BEACH SHORES, FL 32118 DAYTONA BEACH SHORES, FL 32118

FEI Number: 20-2628587 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CARD, MARK CARD, MARK

2 OCEANS WEST BLVD. #1209 2 OCEANS WEST BLVD. #1809

DAYTONA BEACH SHORES, FL 32118 US DAYTONA BEACH SHORES, FL 32118 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: 01/18/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVP () Delete Title: DPVP (X) Change () Addition

Name: CARD, MARK K Name: CARD, MARK K

Address: 2 OCEANS WEST BLVD. #1209 Address: 2 OCEANS WEST BLVD. #1809
City-St-Zip: DAYTONA BEACH SHORES, FL 32118 City-St-Zip: DAYTONA BEACH SHORES, FL 32118

Title: ST () Delete Title: ST (X) Change () Addition

Name: CARD, JENNIFER Name: CARD, JENNIFER

Address: 2 OCEANS WEST BLVD. #1209 Address: 2 OCEANS WEST BLVD. #1809
City-St-Zip: DAYTONA BEACH SHORES, FL 32118 City-St-Zip: DAYTONA BEACH SHORES, FL 32118

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: JENNIFER CARD ST 01/18/2009