

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000050488

FILED
Jan 11, 2008
Secretary of State

Entity Name: ANDREW CHARLES COCHRANE, P.A.

Current Principal Place of Business:

4401 BAY BEACH LN - # 852
FT MYERS, FL 33931

New Principal Place of Business:

1207 SE 37TH STREET
CAPE CORAL, FL 33904

Current Mailing Address:

4401 BAY BEACH LN - # 852
FT MYERS, FL 33931

New Mailing Address:

1207 SE 37TH STREET
CAPE CORAL, FL 33904

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COCHRANE, ANDREW C
4401 BAY BEACH LN - # 852
FT MYERS, FL 33931 US

Name and Address of New Registered Agent:

COCHRANE, ANDREW C
1207 SE 37TH STREET
CAPE CORAL, FL 33904 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: ANDREW C. COCHRANE PA

01/11/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: MR. () Delete
Name: COCHRANE, ANDREW C
Address: 4401 BAY BEACH LN - # 852
City-St-Zip: FT MYERS, FL 33931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change () Addition
Name: COCHRANE, ANDREW C
Address: 1207 SE 37TH STREET
City-St-Zip: CAPE CORAL, FL 33904

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 C. COCHRANE PA

PRES

01/11/2008

Electronic Signature of Signing Officer or Director

Date