## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000051772

Entity Name: TYLER MCRAE, P.A.

FILED Sep 02, 2009 Secretary of State

**Current Principal Place of Business:** 

**New Principal Place of Business:** 

945 E. LAS OLAS BLVD. FT. LAUDERDALE, FL 33301 US 500 SIMONTON STREET

KEY WEST, FL 33040

**Current Mailing Address:** 

**New Mailing Address:** 

350 SE 2ND STREET

522 CAROLINE ST

2460 FT. LAUDERDALE, FL 33301 KEY WEST, FL 33040 US

FEI Number: 20-2639397

Certificate of Status Desired ( )

FEI Number Applied For ( ) FEI Number Not Applicable ( )

Name and Address of New Registered Agent:

MCRAE, TYLER 350 SE 2ND STREET MCRAE, TYLER S 522 CAŔOLINE ST.

2460

KEY WEST, FL 33040 US

FT. LAUDERDALE, FL 33301 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: TYLER MCRAE

Name and Address of Current Registered Agent:

09/02/2009

Electronic Signature of Registered Agent

US

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title:

(X) Change ( ) Addition

MCRAE, TYLER Name: 350 SE 2ND STREET #2460 Address:

Name: Address: City-St-Zip: MCRAE, TYLER S 522 CAROLINE ST. KEY WEST, FL 33040 US

City-St-Zip: FT. LAUDERDALE, FL 33301 US

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.

Ρ SIGNATURE: TYLER MCRAE

09/02/2009