

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000052892

Entity Name: DAVID S. SKLAR, P.A.

FILED
Jan 25, 2009
Secretary of State

Current Principal Place of Business:

19123 LARCHMONT DR.
TAMPA, FL 33556

New Principal Place of Business:

19123 LARCHMONT DR.
ODESSA, FL 33556

Current Mailing Address:

19123 LARCHMONT DR.
TAMPA, FL 33556

New Mailing Address:

FEI Number: 01-0237280

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKLAR, DAVID S
19123 LARCHMONT DR.
ODESSA, FL 33556 US

Name and Address of New Registered Agent:

SKLAR, DAVID S MR
19123 LARCHMONT DR.
TAMPA, FL 33556 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: DAVID S SKLAR

01/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SKLAR, DAVID S PRES
Address: 19123 LARCHMONT DR.
City-St-Zip: ODESSA, FL 33556

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change () Addition
Name: SKLAR, DAVID S PRES
Address: 19123 LARCHMONT DR.
City-St-Zip: TAMPA, FL 33556

Title: MR () Change (X) Addition
Name: SKLAR, DAVID S PRES
Address: 19123 LARCHMONT DRIVE
City-St-Zip: TAMPA, FL 33556

Title: MR () Change (X) Addition
Name: SKLAR, DAVID S PRES
Address: 19123 LARCHMONT DRIVE
City-St-Zip: TAMPA, FL 33556

Title: MR () Change (X) Addition
Name: SKLAR, DAVID S PRES
Address: 19123 LARCHMONT DRIVE
City-St-Zip: TAMPA, FL 33556

Title: MR () Change (X) Addition
Name: SKLAR, DAVID S PRES
Address: 19123 LARCHMONT DRIVE
City-St-Zip: TAMPA, FL 33556

Title: MR () Change (X) Addition
Name: SKLAR, DAVID S PRES
Address: 19123 LARCHMONT DRIVE
City-St-Zip: TAMPA, FL 33556

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: DAVID S SKLAR

MR

01/25/2009

Electronic Signature of Signing Officer or Director

Date