2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# P05000058424

Entity Name: CASSANDRA RACINE-RIGAUD,P.A.

Current Principal Place of Business:

8201 PETERS RD.
SUITE 1000
PLANTATION, FL 33324 US

New Principal Place of Business:

6900 NW 5TH STREET
PLANTATION, FL 33317 US

Current Mailing Address:

8201 PETERS RD.
SUITE 1000
PLANTATION, FL 33324 US

New Mailing Address:

6900 NW 5TH STREET
PLANTATION, FL 33317 US

FEI Number: 73-1733916 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RACINE-RIGAUD, CASSANDRA
6916 NW 5TH STREET
PLANTATION, FL 33317 US

Name and Address of New Registered Agent:

RACINE-RIGAUD, CASSANDRA
6900 NW 5TH STREET
PLANTATION, FL 33317 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: 04/29/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: RACINE-RIGAUD, CASSANDRA
Address: 8201 PETERS RD.
City-St-Zip: PLANTATION, FL 33324

Title: D ( ) Delete
Name: RACINE-RIGAUD, CASSANDRA
Address: 8201 PETERS RD.
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: RACINE-RIGAUD, CASSANDRA
Address: 6900 NW 5TH STREET
City-St-Zip: PLANTATION, FL 33317

Title: D (X) Change ( ) Addition
Name: RACINE-RIGAUD, CASSANDRA
Address: 6900 NW 5TH STREET
City-St-Zip: PLANTATION, FL 33317

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: CASSANDRA RACINE-RIGAUD P 04/29/2009
Electronic Signature of Signing Officer or Director Date