

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000071748

FILED
Apr 29, 2008
Secretary of State

Entity Name: FLORIDA POLYGRAPH ASSOCIATES, INC.

Current Principal Place of Business:

395 E. CENTRAL AVENUE
MERRILL LYNCH BUILDING
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 924
WINTER HAVEN, FL 33882

New Mailing Address:

FEI Number: 27-0123301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCALLISTER, WILLIAM L
2216 SAWGRASS COURT
WINTER HAVEN, FL 33884 US

Name and Address of New Registered Agent:

MCCALLISTER, WILLIAM L
395 E. CENTRAL AVENUE
WINTER HAVEN, FL 33880 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: WILLIAM L. MCCALLISTER

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCCALLISTER, WILLIAM L
Address: P.O. BOX 924
City-St-Zip: WINTER HAVEN, FL 33882

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MCCALLISTER, WILLIAM L
Address: P.O. BOX 924
City-St-Zip: WINTER HAVEN, FL 33882

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: WILLIAM L. MCCALLISTER

PRES

04/29/2008

Electronic Signature of Signing Officer or Director

Date