2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# P05000115496

Entity Name: MARK ANTHONY GAGER, P.A.

Current Principal Place of Business:

932 S. WICKHAM RD.
WEST MELBOURNE, FL 32904

New Principal Place of Business:

1124 S. WICKHAM RD.
WEST MELBOURNE, FL 32904

Current Mailing Address:

932 S. WICKHAM RD.
WEST MELBOURNE, FL 32904

New Mailing Address:

1124 S. WICKHAM RD.
WEST MELBOURNE, FL 32904

FEI Number: 20-3350904 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GAGER, MARK ANTHONY
932 S. WICKHAM RD.
WEST MELBOURNE, FL 32904 US

Name and Address of New Registered Agent:

GAGER, MARK ANTHONY
1124 S. WICKHAM RD.
WEST MELBOURNE, FL 32904 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: 04/28/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete
Name: GAGER, MARK ANTHONY
Address: 932 S. WICKHAM RD.
City-St-Zip: WEST MELBOURNE, FL 32904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition
Name: GAGER, MARK ANTHONY
Address: 1124 S. WICKHAM RD.
City-St-Zip: WEST MELBOURNE, FL 32904

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: MARK ANTHONY GAGER DPST 04/28/2008
Electronic Signature of Signing Officer or Director — Date