

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000001732

FILED
Jan 23, 2008
Secretary of State

Entity Name: LAW OFFICE OF CONRAD WILLKOMM, P.A.

Current Principal Place of Business:

2081 TAMIAMI TRAIL NORTH
NAPLES, FL 34102

New Principal Place of Business:

1100 FIFTH AVENUE SOUTH
SUITE 409
NAPLES, FL 34102

Current Mailing Address:

2081 TAMIAMI TRAIL NORTH
NAPLES, FL 34102

New Mailing Address:

1100 FIFTH AVENUE SOUTH
SUITE 409
NAPLES, FL 34102

FEI Number: 20-4544316

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLKOMM, CONRAD
2081 TAMIAMI TRAIL NORTH
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

WILLKOMM, CONRAD
1100 FIFTH AVENUE SOUTH
SUITE 409
NAPLES, FL 34102 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:

01/23/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVTS () Delete
Name: WILLKOMM, CONRAD
Address: 2081 TAMIAMI TRAIL NORTH
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVTS (X) Change () Addition
Name: WILLKOMM, CONRAD
Address: 1100 FIFTH AVENUE SOUTH, SUITE 409
City-St-Zip: NAPLES, FL 34102

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: CONRAD WILLKOMM

PVST

01/23/2008

Electronic Signature of Signing Officer or Director

Date