2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# P06000013674

Entity Name: HEALTH LAW OFFICE OF JODI LAURENCE, P.A.

Current Principal Place of Business:

7805 SW 6TH CT
PLANTATION, FL 33324

New Principal Place of Business:

3501 S. UNIVERSITY DRIVE
SUITE 10
DAVIE, FL 33328

Current Mailing Address:

7805 SW 6TH CT
PLANTATION, FL 33324

New Mailing Address:

3501 S. UNIVERSITY DRIVE
SUITE 10
DAVIE, FL 33328

FEI Number: 83-0449760 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAURENCE, JODI
7805 SW 6TH CT
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

LAURENCE, JODI
3501 S. UNIVERSITY DRIVE
SUITE 10
DAVIE, FL 33328 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: JODI LAURENCE 03/23/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LAURENCE, JODI
Address: 3506 DEL MAR AVE
City-St-Zip: DAVIE, FL 33328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JODI LAURENCE D 03/23/2009
Electronic Signature of Signing Officer or Director Date