## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000020873

Entity Name: MICHAEL W. DIKE, PA

FILED Apr 30, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 241 5TH STREET NW NAPLES, FL 34120 **Current Mailing Address: New Mailing Address:** 241 5TH STREET NW NAPLES, FL 34120 FEI Number: 20-4283697 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LAMB, JEFF TAX ACCOUNTING& FINANCIAL ASSOCIATES INC 809 WALKERBILT ROAD 809 WALKERBILT ROAD SUITE #5 SUITE #5 NAPLES, FL 34110 US NAPLES, FL 34110 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: BENJAMIN J COTTRELL 04/30/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition DIKE, MICHAEL W Name: Name: 241 5TH STREET NW Address: Address: City-St-Zip: NAPLES, FL 34120 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition DIKE, CHRISTINE A Name: Name: 241 5TH STREET NW Address: Address: NAPLES, FL 34120 City-St-Zip: 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: MICHAEL DIKE **PRES** 04/30/2008