2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000024668

Entity Name: LINDA JACOBS, P.A.

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4196 RIVER BANK WAY 7831 REFLECTION COVE DRIVE PORT CHARLOTTE, FL 33980

101

FORT MYERS, FL 33907

Current Mailing Address: New Mailing Address:

4196 RIVER BANK WAY 7831 REFLECTION COVE DRIVE PORT CHARLOTTE, FL 33980

FORT MYERS, FL 33907

FEI Number: 20-4321255 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:

JACOBS, LINDA JACOBS, LINDA 4196 RIVER BANK WAY 7831 REFLECTION COVE DRIVE

PORT CHARLOTTE, FL 33980 US FORT MYERS, FL 33907 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: 03/24/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

JACOBS, LINDA JACOBS, LINDA Name: Name:

4196 RIVER BANK WAY 7831 REFLECTION COVE DRIVE Address: Address: City-St-Zip: PORT CHARLOTTE, FL 33980 City-St-Zip: FORT MYERS, FL 33907

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: LINDA JACOBS DP 03/24/2009