


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 09, 2008 08:00 AM
Secretary of State

DOCUMENT # P06000040606 1. Entity Name SYLVIA S. HURST, P.A.	
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Principal Place of Business 621 S FLETCHER AVE FERNANDINA BEACH, FL 32034	Mailing Address 621 S FLETCHER AVE FERNANDINA BEACH, FL 32034
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DO NOT WRITE IN THIS SPACE



06022008 No Chg-P CR2E034 (11/05)

4. FEI Number 16-1753713	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent GALZIER & GLAZIER, P.A. 8825 PERIMETER PARK BOULEVARD SUITE 504 JACKSONVILLE, FL 32216
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reissuing)

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD HURST, SYLVIA S 621 S FLETCHER AVE FERNANDINA BEACH, FL 32034
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06/09/08-80003-010 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sylvia S. Hurst 6/5/08 (904)261-5575
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #