## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000051925

Entity Name: HENRY B. MCWRIGHT IV, P.A.

FILED Apr 24, 2008 Secretary of State

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

2939 MAJESTIC OAKS LANE 3701 MILL VIEW CT

GREEN COVE SPRINGS, FL 32043 ORANGE PARK, FL 32065

**Current Mailing Address: New Mailing Address:** 

2939 MAJESTIC OAKS LANE 3701 MILL VIEW CT

ORANGE PARK, FL 32065 GREEN COVE SPRINGS, FL 32043

FEI Number: 20-4741968 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:

MCWRIGHT, BARRON MCWRIGHT, BARRON 2939 MAJESTIC OAKS LANE 3701 MILL VIEW CT

GREEN COVE SPRINGS, FL 32043 US ORANGE PARK, FL 32065 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: BARRON MCWRIGHT 04/24/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete Title: (X) Change ( ) Addition MCWRIGHT, BARRON MCWRIGHT, BARRON Name: Name: 2939 MAJESTIC OAKS LANE 3701 MILL VIEW CT Address: Address: City-St-Zip: GREEN COVE SPRINGS, FL 32043 City-St-Zip: ORANGE PARK, FL 32065

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

MCWRIGHT, III, HENRY Name: Name: 2939 MAJESTIC OAKS LANE Address: Address: GREEN COVE SPRINGS, FL 32043 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: BARRON MCWRIGHT **DVPT** 04/24/2008