

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000073935

FILED
Apr 15, 2009
Secretary of State

Entity Name: LAW OFFICES OF MICHAEL P. SHIENVOLD, P.A.

Current Principal Place of Business:

1000 SOUTH PINE ISLAND ROAD
SUITE 330
PLANTATION, FL 33324 US

New Principal Place of Business:

5001 SOUTH UNIVERSITY DRIVE
SUITE B
DAVIE, FL 33328 US

Current Mailing Address:

1000 SOUTH PINE ISLAND ROAD
SUITE 330
PLANTATION, FL 33324 US

New Mailing Address:

5001 SOUTH UNIVERSITY DRIVE
SUITE B
DAVIE, FL 33328 US

FEI Number: 20-4941137

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIENVOLD, MICHAEL P
1000 SOUTH PINE ISLAND ROAD
SUITE 330
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

SHIENVOLD, MICHAEL P
5001 SOUTH UNIVERSITY DR.
SUITE B
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:

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: SHIENVOLD, MICHAEL P
Address: 1000 SOUTH PINE ISLAND ROAD, #330
City-St-Zip: PLANTATION, FL 33324 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: SHIENVOLD, MICHAEL P
Address: 5001 SOUTH UNIVERSITY DR. SUITE B
City-St-Zip: DAVIE, FL 33328 US

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 PAUL SHIENVOLD

PRES

04/15/2009

Electronic Signature of Signing Officer or Director

Date