2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000011934

Entity Name: SOUTH FLORIDA LEGAL GOPHERS INC.

FILED Jun 03, 2008 Secretary of State

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

15841 PINES BLVD. 800 SW 125 WAY

#291 #205

PEMBROKE PINES, FL 33027 PEMBROKE PINES, FL 33027

Current Mailing Address: New Mailing Address:

15841 PINES BLVD. P.O BOX 277984 #291 MIRAMAR, FL 33027

#291 PEMBROKE PINES, FL 33027

FEI Number: 14-1988074 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:

WAUGH, SHONA WAUGH, SHONA
15841 PINES BLVD 9860. SHERIDAN STREET

15841 PÍNES BLVD. 9860 SHÉRIDAN STREET #291 #305

PEMBROKE PINES, FL 33027 US PEMBROKE PINES, FL 33024 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: SHONA WAUGH 06/03/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 WAUGH, SHONA
 Name:
 WAUGH, SHONA

 Address:
 15841 PINES BLVD. #291
 Address:
 9860 SHERIDAN STREET # 305

 City-St-Zip:
 PEMBROKE PINES, FL 33027
 City-St-Zip:
 PEMBROKE PINES, FL 33024

Title: VST () Delete Title: V/P (X) Change () Addition

Name: WAUGH, SHONA Name: WAUGH, SHONA

Address: 15841 PINES BLVD. #291 Address: 9860 SHERIDAN STREET
City-St-Zip: PEMBROKE PINES, FL 33027 City-St-Zip: PEMBROKE PINES, FL 33024

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: SHONA WAUGH PRES 06/03/2008