

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000046407

FILED  
Apr 03, 2008  
Secretary of State

**Entity Name:** LAW OFFICES OF JEFFREY A. HERZOG, P.A.

**Current Principal Place of Business:**

2312 MOON SHADOW ROAD  
NEW PORT RICHEY, FL 34655

**New Principal Place of Business:**

3110 US ALT 19  
SUITE B  
PALM HARBOR, FL 34683

**Current Mailing Address:**

2312 MOON SHADOW ROAD  
NEW PORT RICHEY, FL 34655

**New Mailing Address:**

3110 US ALT 19  
SUITE B  
PALM HARBOR, FL 34683

**FEI Number:** 20-8844068

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HERZOG, JEFFREY A  
2312 MOON SHADOW ROAD  
NEW PORT RICHEY, FL 34655 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HERZOG, JEFFREY A ESQ  
Address: 2312 MOON SHADOW ROAD  
City-St-Zip: NEW PORT RICHEY, FL 34655 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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:** JEFFREY A HERZOG

P.A.

04/03/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date