

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000066799

FILED
Apr 21, 2008
Secretary of State

Entity Name: CARRIE STOLZER ROBINSON, P.A.

Current Principal Place of Business:

SUITE 700 ONE EAST BROWARD BLVD
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

SUITE 700 ONE EAST BROWARD BLVD
FORT LAUDERDALE, FL 33301

New Mailing Address:

POST OFFICE BOX 100
FORT LAUDERDALE, FL 33302

FEI Number: 26-0344659

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FILINGS, INC.
3732 N.W. 16TH STREET
FORT LAUDERDALE, FL 33311 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: D () Delete
Name: ROBINSON, CARRIE S
Address: SUITE 700 ONE EAST BROWARD BLVD
City-St-Zip: FORT LAUDERDALE, FL 33301

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: CARRIE STOLZER ROBINSON

D

04/21/2008

Electronic Signature of Signing Officer or Director

Date