

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000081290

FILED
Apr 16, 2009
Secretary of State

Entity Name: ELIZABETH MORROW-SLAMAN PA

Current Principal Place of Business:

519 PINE AVE
ANNA MARIA, FL 34216 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 4033
ANNA MARIA, FL 34236 US

New Mailing Address:

FEI Number: 26-0559727

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORROW-SLAMAN, ELIZABETH
519 PINE AVE
ANNA MARIA, FL 34236 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: MORROW-SLAMAN, ELIZABETH
Address: PO BOX 4033
City-St-Zip: ANNA MARIA, FL 34236

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: ELIZABETH MORROW-SLAMAN

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04/16/2009

Electronic Signature of Signing Officer or Director

_____ Date