2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000089285

Entity Name: THE LAW OFFICE OF ROBERT T. MCCABE, P.A.

FILED Apr 20, 2009 Secretary of State

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

902 N. ARMENIA AVE. 3010 N. BOULEVARD TAMPA, FL 33609 TAMPA, FL 33603

Current Mailing Address: New Mailing Address:

902 N. ARMENIA AVE. 3010 N. BOULEVARD TAMPA, FL 33609 TAMPA, FL 33603

FEI Number: 26-0680172 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:

MCCABE, ROBERT T
902 N. ARMENIA AVE.
TAMPA, FL 33609 US

MCCABE, ROBERT T
3010 N. BOULEVARD
TAMPA, FL 33603 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: 04/20/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: PRES (X) Change () Addition

 Name:
 MCCABE, ROBERT T
 Name:
 MCCABE, ROBERT T

 Address:
 902 NORTH ARMENIA AVENUE
 Address:
 3010 N. BOULEVARD

 City-St-Zip:
 TAMPA, FL 33609
 City-St-Zip:
 TAMPA, FL 33603

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: ROBERT T. MCCABE PRES 04/20/2009