2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Dec 11, 2008
Secretary of State

DOCUMENT# P07000127042

Entity Name: ACCIDENT ATTORNEYS' ASSOCIATION, P.A.

Current Principal Place of Business:	**New Principal Place of Business:**
3800 S. OCEAN DR., #217 HOLLYWOOD, FL 33019	

Current Mailing Address:	**New Mailing Address:**
3800 S. OCEAN DR., #217 HOLLYWOOD, FL 33019	

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
WEISSBARD, SARAH 3800 S. OCEAN DR., #217 HOLLYWOOD, FL 33019 US	KIRSCH, BRUCE J 3800 S. OCEAN DR., #217 HOLLYWOOD, FL 33019 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: BRUCE J. KIRSCH 12/11/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:		**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**	
Title:	PD ( ) Delete	Title:	PD (X) Change ( ) Addition
Name:	WEISSBARD, SARAH	Name:	ROSENTHAL, MICHAEL L
Address:	3800 S. OCEAN DR., #217	Address:	3800 S. OCEAN DR., #217
City-St-Zip:	HOLLYWOOD, FL 33019	City-St-Zip:	HOLLYWOOD, FL 33019

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: MICHAEL L. ROSENTHAL PD 12/11/2008

Electronic Signature of Signing Officer or Director Date