

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000003778

FILED
Sep 01, 2009
Secretary of State

Entity Name: W. THOMAS COPELAND, PROFESSIONAL ASSOCIATION

Current Principal Place of Business:

166 SW U.S. 221
GREENVILLE, FL 32331

New Principal Place of Business:

190 SW RANGE AVE
MADISON, FL 32340

Current Mailing Address:

166 SW U.S. 221
GREENVILLE, FL 32331

New Mailing Address:

190 SW RANGE AVE
MADISON, FL 32340

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

W. THOMAS COPELAND
166 SW U.S. 221
GREENVILLE, FL 32331 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: W. THOMAS COPELAND
Address: 166 SW U.S. 221
City-St-Zip: GREENVILLE, FL 32331

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: W. THOMAS COPELAND

D

09/01/2009

Electronic Signature of Signing Officer or Director

Date