

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000066187

FILED
Apr 28, 2009
Secretary of State

Entity Name: R. FLINT CRUMP P.A.

Current Principal Place of Business:

10021 NW 12TH LANE
GAINESVILLE, FL 32606 US

New Principal Place of Business:

4703 NW 53RD AVE
STE A-1
GAINESVILLE, FL 32653 US

Current Mailing Address:

12921 SW 1ST ROAD
SUITE 107-303
NEWBERRY, FL 32669 US

New Mailing Address:

FEI Number: 26-2961833 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRUMP, RUSSELL F
10021 NW 12TH LANE
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

CRUMP, RUSSELL F
4703 NW 53RD AVE
STE A-1
GAINESVILLE, FL 32653 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: _____

Electronic Signature of Registered Agent

04/28/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P, D () Delete
Name: CRUMP, RUSSELL F
Address: 12921 SW 1ST ROAD, SUITE 107-303
City-St-Zip: NEWBERRY, FL 32669 US

Title: S (X) Delete
Name: CRUMP, RUSSELL F
Address: 12921 SW 1ST ROAD, SUITE 107-303
City-St-Zip: NEWBERRY, FL 32669 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: CRUMP, RUSSELL F
Address: 12921 SW 1ST ROAD, SUITE 107-303
City-St-Zip: NEWBERRY, FL 32669 US

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: RUSSELL F CRUMP

Electronic Signature of Signing Officer or Director

PTSD

04/28/2009

Date