

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000075809

FILED
Apr 30, 2009
Secretary of State

Entity Name: TRUSTCOUNSEL, P.A.

Current Principal Place of Business:

744 S. VILLAGE CIRCLE
TAMPA, FL 33606

New Principal Place of Business:

1804 WEST BAKER STREET
SUITE G
TAMPA, FL 33563

Current Mailing Address:

744 S. VILLAGE CIRCLE
TAMPA, FL 33606

New Mailing Address:

1804 WEST BAKER STREET
SUITE G
TAMPA, FL 33563

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

Name and Address of Current Registered Agent:

WELTER, WILLIAM L
744 S. VILLAGE CIRCLE
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

WELTER, WILLIAM L ESQ.
1804 WEST BAKER STREET
SUITE G
PLANT CITY, FL 33563 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: WILLIAM WELTER, ESQ.

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: WELTER, WILLIAM L
Address: 744 S. VILLAGE CIRCLE
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: WELTER, WILLIAM L
Address: 1804 WEST BAKER STREET, SUITE G
City-St-Zip: TAMPA, FL 33563

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: WILLIAM WELTER, ESQ.

DIR

04/30/2009

Electronic Signature of Signing Officer or Director

Date