2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# P08000097567

Entity Name: PIA MANAGEMENT SERVICES OF FLORIDA, INC.

Current Principal Place of Business:

1390 TIMBERLANE ROAD
TALLAHASSEE, FL 32312 US

New Principal Place of Business:

Current Mailing Address:

1390 TIMBERLANE ROAD
TALLAHASSEE, FL 32312 US

New Mailing Address:

FEI Number: 32-0265458 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

O'CONNELL, MARK A
1390 TIMBERLANE ROAD
TALLAHASSEE, FL 32312 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: O'CONNELL, MARK A
Address: 1390 TIMBERLANE ROAD
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: DST ( ) Delete
Name: MOCK, KATHY
Address: 1390 TIMBERLANE ROAD
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: LANGSTON, EDWARD
Address: 500 SEMORAN BLVD
City-St-Zip: CASSELBERRY, FL 32707 US

Title: PRES ( ) Change (X) Addition
Name: WILLIAMS, LORENE
Address: 5003 OLD CHENEY HWY
City-St-Zip: ORLANDO, FL 32807

Title: ST ( ) Change (X) Addition
Name: COBB, DAVID
Address: 8155 CR 476B
City-St-Zip: BUSHNELL, FL 33513

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: MARK O'CONNELL D 03/24/2009

Electronic Signature of Signing Officer or Director — Date