

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000109831

FILED
May 08, 2009
Secretary of State

Entity Name: FORECLOSURE DEFENSE ATTORNEYS, P.A.

Current Principal Place of Business:

150 COCOA ISLES BLVD., SUITE 404
COCOA BCH, FL 32931

New Principal Place of Business:

Current Mailing Address:

150 COCOA ISLES BLVD., SUITE 404
COCOA BCH, FL 32931

New Mailing Address:

FEI Number: 26-4598025

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARO, MICHAEL
150 COCOA ISLES BLVD., SUITE 404
COCOA BCH, FL 32931 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: GINGO, GEORGE M
Address: 3005 IRWIN AVE.
City-St-Zip: MIMS, FL 32754

Title: D () Delete
Name: FARO, MICHAEL A
Address: 150 COCOA ISLES BLVD., SUITE 404
City-St-Zip: COCOA BCH, FL 32931

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D () Change (X) Addition
Name: CROWDER, JOHN C
Address: 150 COCOA ISLES BLVD., SUITE 404
City-St-Zip: COCOA BEACH, FL 32931

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 FARO

D

05/08/2009

Electronic Signature of Signing Officer or Director

Date