

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000014243

FILED
Apr 30, 2008
Secretary of State

Entity Name: THOMPSON GOODIS THOMPSON GROSECLOSE & RICHARDSON, A PROFESSIONAL ASSOCIATION

Current Principal Place of Business:

700 CENTRAL AVENUE
SUITE 500
ST. PETERSBURG, FL 33701 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 90
ST. PETERSBURG, FL 33731 US

New Mailing Address:

PO BOX 90
ST. PETERSBURG, FL 33731 US

FEI Number: 59-3161924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODIS, JEFFREY M
700 CENTRAL AVENUE
SUITE 500
ST. PETERSBURG, FL 33701 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: DS () Delete
Name: THOMPSON, JAMES B
Address: 700 CENTRAL AVENUE, SUITE 500
City-St-Zip: ST. PETERSBURG, FL 33701

Title: DVT () Delete
Name: GOODIS, JEFFREY M
Address: 700 CENTRAL AVENUE, SUITE 500
City-St-Zip: ST. PETERSBURG, FL 33701

Title: DP () Delete
Name: THOMPSON JR JAMES B,
Address: 700 CENTRAL AVENUE, SUITE 500
City-St-Zip: ST PETERSBURG, FL 33701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JAMES B. THOMPSON, JR.

DP

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date