


FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90393 029 ***158.75

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000021326			
1. Entity Name ZOOK MOORE AND ASSOCIATES, INC.		40	
Principal Place of Business 4431 EMBARCADERO DRIVE STE. 406 WEST PALM BEACH, FL 33407		Mailing Address P.O. BOX 33068 RALEIGH, NC 27636-3068	
2. Principal Place of Business - No P.O. Box # 4431 Embarcadero Drive		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State West Palm Beach, FL		City & State	
Zip 33407		Country Palm Beach	
Country Palm Beach		Zip Country	
6. Name and Address of Current Registered Agent ATZ, JOHN C 4431 EMBARCADERO DRIVE WEST PALM BEACH, FL 33407		7. Name and Address of New Registered Agent Name CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road City Plantation FL Zip Code 33324-4413	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>Dale W. Morris</i> DALE W. MORRIS ASSISTANT VICE PRESIDENT DATE 4-21-08 <small>Signature, typed or printed name of registered agent and filer if applicable. (NOTE: Registered Agent signature required when reappointing)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD ELLIS, NICHOLAS L 3001 WESTON PARKWAY CARY, NC 27513 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST COOK, RICHARD N 3001 WESTON PARKWAY CARY, NC 27513 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Richard N. Cook</i>		Richard N. Cook 4-28-08 919-677-2000	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>DATE DAY/PHONE #</small>	