

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000043985

FILED
Mar 26, 2009
Secretary of State

Entity Name: DAVID PEARSON ASSOCIATES, INCORPORATED

Current Principal Place of Business:

1320 S DIXIE HWY SUITE 220
CORAL GABLES, FL 33146 US

New Principal Place of Business:

1450 MADRUGA AVENUE
402
CORAL GABLES, FL 33146 US

Current Mailing Address:

1320 S DIXIE HWY SUITE 220
CORAL GABLES, FL 33146 US

New Mailing Address:

1450 MADRUGA AVENUE
402
CORAL GABLES, FL 33146 US

FEI Number: 65-0418472

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEARSON, DAVID
1320 S DIXIE HWY.
SUITE 220
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

PEARSON, DAVID
1000 HARDEE DRIVE
CORAL GABLES, FL 33146 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:

03/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PEARSON, DAVID
Address: 1320 S DIXIE HWY #220
City-St-Zip: CORAL GABLES, FL 33134 US

Title: S (X) Delete
Name: PEARSON, CHRISTOPHER
Address: 1320 S DIXIE HWY #220
City-St-Zip: CORAL GABLES, FL 33134 US

Title: P () Delete
Name: PEARSON, ANNE B
Address: 1320 S DIXIE HWY #220
City-St-Zip: CORAL GABLES, FL 33134 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PEARSON, DAVID
Address: 1450 MADRUGA AVENUE #402
City-St-Zip: CORAL GABLES, FL 33134 US

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

Title: DST (X) Change () Addition
Name: PEARSON, ANNE B
Address: 1450 MADRUGA AVENUE #402
City-St-Zip: CORAL GABLES, FL 33134 US

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: DAVID PEARSON

PRES

03/26/2009

Electronic Signature of Signing Officer or Director

Date