

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000006726

Entity Name: LINDA S. ROSE, P.A.

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

2573 BARRINGTON CIRCLE
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

1520 KILLEARN CENTER BLVD.
TALLAHASSEE, FL 32309 US

Current Mailing Address:

2573 BARRINGTON CIRCLE
TALLAHASSEE, FL 32308 US

New Mailing Address:

1520 KILLEARN CENTER BLVD.
TALLAHASSEE, FL 32309 US

FEI Number: 59-3226893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSE, BARRY F
2573 BARRINGTON CIRCLE
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

ROSE, BARRY F
1520 KILLEARN CENTER BLVD.
TALLAHASSEE, FL 32309 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:

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ROSE, LINDA S
Address: 2573 BARRINGTON CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: TS () Delete
Name: ROSE, BARRY F
Address: 2573 BARRINGTON CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ROSE, LINDA S
Address: 1520 KILLEARN CENTER BLVD.
City-St-Zip: TALLAHASSEE, FL 32309

Title: TS (X) Change () Addition
Name: ROSE, BARRY F
Address: 1520 KILLEARN CENTER BLVD.
City-St-Zip: TALLAHASSEE, FL 32309

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: BARRY F. ROSE

TS

04/29/2008

Electronic Signature of Signing Officer or Director

Date