

**2009 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 18, 2009  
Secretary of State**

DOCUMENT# P95000031240

Entity Name: CAROLYN M. BURKE, P.A.

**Current Principal Place of Business:**

3571 LOAN WOLF TRL  
SAINT AUGUSTINE, FL 32086 US

**New Principal Place of Business:**

3571 LONE WOLF TRL  
SAINT AUGUSTINE, FL 32086 US

**Current Mailing Address:**

3571 LOAN WOLF TRL  
SAINT AUGUSTINE, FL 32086 US

**New Mailing Address:**

3571 LONE WOLF TRL  
SAINT AUGUSTINE, FL 32086 US

FEI Number: 65-0573935      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BURKE, CAROLYN M  
3571 LONE WOLF TRL  
SAINT AUGUSTINE, FL 32086 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: D ( ) Delete  
Name: BURKE, CAROLYN M  
Address: 3571 LONE WOLF TRL  
City-St-Zip: SAINT AUGUSTINE, FL 32086

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: CAROLYN M. BURKE

D

03/18/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date