

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000096848

FILED
Apr 01, 2009
Secretary of State

Entity Name: LAW OFFICES OF BARBARA J. PITTMAN, P.A.

Current Principal Place of Business:

10014 N. DALE MABRY, SUITE 101
TAMPA, FL 33618

New Principal Place of Business:

10014 N. DALE MABRY
SUITE 101
TAMPA, FL 33618

Current Mailing Address:

10014 N. DALE MABRY, SUITE 101
TAMPA, FL 33618

New Mailing Address:

10014 N. DALE MABRY
SUITE 101
TAMPA, FL 33618

FEI Number: 59-3315130

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PITTMAN, BARBARA J
10014 N. DALE MABRY, SUITE 101
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

PITTMAN, BARBARA J
10014 N. DALE MABRY
SUITE 101
TAMPA, FL 33618 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:

04/01/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PITTMAN, BARBARA J
Address: 4327 WATERFORD LANDING
City-St-Zip: LUTZ, FL 33558

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PITTMAN, BARBARA J
Address: 4327 WATERFORD LANDING DR.
City-St-Zip: LUTZ, FL 33558

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: BARBARA J. PITTMAN

OFFI

04/01/2009

Electronic Signature of Signing Officer or Director

Date