## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000001481

FILED Apr 14, 2008 Secretary of State

Entity Name: ASSOCIATED LICENSED PROFESSIONS OF FLORIDA, INC.

Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
SUITE 105					
	SSEE, FL 3230				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
SUITE 105					
	SSEE, FL 3230			2.75 / 52 / 2.1/	
FEI Number:	59-3355320	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
1020 E. LA SUITE 105	JR., CHARLES FAYETTE STR SSEE, FL 3230	EET			
	named entity s e of Florida.	ubmits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUF	RE:				
	Electroni	c Signature of Registered Ag	ent	Date	
Election Car	npaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () BALARA, TERRY 525 CARCABA ST AUGUSTINE,		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () BARNER, CHAR 307 SWEETBRI TALLAHASSEE,	AR DR	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: CHARLES BARNER D 04/14/2008