

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000074012

Entity Name: AMERITAX OF FLORIDA, INC.

FILED  
Feb 08, 2008  
Secretary of State

## Current Principal Place of Business:

4475 US 1 SOUTH  
STE 103  
ST AUGUSTINE, FL 32086 US

## Current Mailing Address:

4475 US 1 SOUTH  
103  
ST AUGUSTINE, FL 32086 US

## New Principal Place of Business:

4475 US 1 SOUTH  
STE 106  
ST AUGUSTINE, FL 32086 US

## New Mailing Address:

PO BOX 860145  
ST AUGUSTINE, FL 320860145 US

FEI Number: 59-3399347

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CRAWFORD, JOHN R  
4475 US 1 SOUTH  
STE 103  
ST AUGUSTINE, FL 32086 US

## Name and Address of New Registered Agent:

CRAWFORD, JOHN R  
123 SUNSET CIRCLE S  
ST AUGUSTINE, FL 32080 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: JOHN R CRAWFORD

02/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CRAWFORD, JOHN R  
Address: 4475 US 1 SOUTH STE 103  
City-St-Zip: ST AUGUSTINE, FL 32086

Title: D ( ) Delete  
Name: CRAWFORD, PHYLLIS E  
Address: 4475 US 1 SOUTH STE 103  
City-St-Zip: ST AUGUSTINE, FL 32086

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: CRAWFORD, JOHN R  
Address: 123 SUNSET CIRCLE S  
City-St-Zip: ST AUGUSTINE, FL 32080

Title: D (X) Change ( ) Addition  
Name: CRAWFORD, PHYLLIS E  
Address: 123 SUNSET CIRCLE S  
City-St-Zip: ST AUGUSTINE, FL 32080

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: JOHN R CRAWFORD

D

02/08/2008

Electronic Signature of Signing Officer or Director

Date