

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000089316

FILED  
Mar 13, 2009  
Secretary of State

Entity Name: ESTES, INGRAM, FOELS & GIBBS, P.A.

**Current Principal Place of Business:**

37 NORTH ORANGE AVE  
STE 300  
ORLANDO, FL 328012439

**New Principal Place of Business:**

**Current Mailing Address:**

37 NORTH ORANGE AVE  
STE 300  
ORLANDO, FL 328012439

**New Mailing Address:**

FEI Number: 59-3407579      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

INGRAM, CHARLES J  
37 N ORANGE AVE  
STE 300  
ORLANDO, FL 32801 US

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

INGRAM, J. CHARLES  
37 N ORANGE AVE  
STE 300  
ORLANDO, FL 32801 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: J. CHARLES INGRAM      03/13/2009  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: STD ( ) Delete  
Name: INGRAM, J. CHARLES  
Address: 37 N ORANGE AVE., STE 300  
City-St-Zip: ORLANDO, FL 328012439

Title: PD ( ) Delete  
Name: ESTES, MICHAEL A  
Address: 37 N ORANGE AVE., STE 300  
City-St-Zip: ORLANDO, FL 328012439

Title: VD ( ) Delete  
Name: FOELS, CRAIG S  
Address: 37 NORTH ORANGE AVE, SUITE 300  
City-St-Zip: ORLANDO, FL 328012439

Title: VD ( ) Delete  
Name: GIBBS, ERIC P  
Address: 37 NORTH ORANGE AVE, SUITE 300  
City-St-Zip: ORLANDO, FL 328012439

Title: V ( ) Delete  
Name: CURRY, CHRISTOPHER C  
Address: 37 N. ORANGE AVE., STE 300  
City-St-Zip: ORLANDO, FL 328012439

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MICHAEL A. ESTES      PRES      03/13/2009  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date