2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000091459

1. Entity Name

CARNEY & ASSOCIATES OF CENTRAL FLORIDA, P.A.



Principal Place of Business

7655 W GULF TO LAKE HIGHWAY

SUITE 2

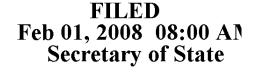
CRYSTAL RIVER, FL 34429

Mailing Address

7655 W GULF TO LAKE HIGHWAY

SUITE 2

CRYSTAL RIVER, FL 34429





DO NOT WRITE IN THIS SPACE

01242008 No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3408992

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CARNEY, BRUCE 7655 W GULF TO LAKE HIGHWAY SUITE 2 CRYSTAL RIVER, FL 34429 DO NOT WRITE IN THIS SPACE

the obligations of registered agent.				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Age			ed Agent signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				
10.	OFFICERS AND DIRECTORS			1. 医线膜性视觉 医西腊氏性腹腔
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CARNEY, BRUCE 7655 W GULF TO LAKE HIGHWAY, S CRYSTAL RIVER, FL 34429	SUITE 2	olu.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				00000081103112 1
NAME STREET ADDRESS CITY-ST-ZIP				NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				

8. 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. I am familiar with, and accept

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-24-08

(352) 795-8884