2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000010197

Entity Name: LOGSDON & THOMAS CORP.

FILED Mar 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

200 MOCKINGBIRD TRAIL 801 SOUTH OLIVE AVE. PALM BEACH, FL 33480 US

SUITE # 1622

WEST PALM BEACH, FL 33401 US

Current Mailing Address: New Mailing Address:

801 SOUTH OLIVE AVE. 200 MOCKINGBIRD TRAIL

PALM BEACH, FL 33480 SUITE # 1622

WEST PALM BEACH, FL 33401 US

FEI Number: 65-0740222 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LOGDSON, JOHN LOGDSON, JOHN 200 MOCKÍNGBIRD TRAIL 801 SOUTH OLIVE AVE.

PALM BEACH, FL 33480 US # 1622

WEST PALM BEACH, FL 33401 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: 03/16/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

LOGSDON, JOHN LOGSDON, JOHN Name: Name:

200 MOCKINGBIRD TRAIL 801 SOUTH OLIVE AVE. #1622 Address: Address: City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: WEST PALM BEACH, FL 33401

() Delete Title: Title: (X) Change () Addition

Name: THOMAS, SUSAN Name: THOMAS, SUSAN

200 MOCKINGBIRD TRAIL Address: 801 SOUTH OLIVE AVE. #1622 Address: City-St-Zip: PALM BEACH, FL 33480 WEST PALM BEACH, FL 33401 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: JOHN LOGSDON **PRES** 03/16/2009