

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000049079

FILED
Jan 13, 2009
Secretary of State

Entity Name: LAW OFFICES OF ROBERT W. ATTRIDGE, JR. P.A.

Current Principal Place of Business:

8606 GOVERNMENT DRIVE
NEW PORT RICHEY, FL 34654

New Principal Place of Business:

3003 KEY HARBOR DR
SAFETY HARBOR, FL 34695

Current Mailing Address:

8606 GOVERNMENT DRIVE
NEW PORT RICHEY, FL 34654

New Mailing Address:

3003 KEY HARBOR DR
SAFETY HARBOR, FL 34695

FEI Number: 59-3448523

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATTRIDGE, ROBERT W JR
8606 GOVERNMENT DRIVE
NEW PORT RICHEY, FL 34654 US

Name and Address of New Registered Agent:

ATTRIDGE, ROBERT W JR
3003 KEY HARBOR DR
SAFETY HARBOR, FL 34695 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:

01/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: ATTRIDGE, ROBERT W JR
Address: 8606 GOVERNMENT DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: D () Delete
Name: ATTRIDGE, ROBERT W JR
Address: 8606 GOVERNMENT DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: ATTRIDGE, ROBERT W JR
Address: 3003 KEY HARBOR DR
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D (X) Change () Addition
Name: ATTRIDGE, ROBERT W JR
Address: 3003 KEY HARBOR DR
City-St-Zip: SAFETY HARBOR, FL 34695

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: ROBERT W ATTRIDGE JR

OFFI

01/13/2009

Electronic Signature of Signing Officer or Director

Date