2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2009
Secretary of State

DOCUMENT# P97000076157

Entity Name: WADE, PALMER & SHOEMAKER, P.A.

Current Principal Place of Business:

25 WEST CEDAR STREET
STE 450
PENSACOLA, FL 32502 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 13510
PENSACOLA, FL 325913510 US

New Mailing Address:

FEI Number: 59-3467674 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WADE, LINDA H
1900 WHALEY AVENUE
PENSACOLA, FL 32503 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PALMER, ROBERT C III
Address: 4604 ROMMITCH LANE
City-St-Zip: PENSACOLA, FL 32504

Title: D ( ) Delete
Name: SHOEMAKER, GREGORY M
Address: 521 TURNBERRY ROAD
City-St-Zip: CANTONMENT, FL 32533

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LINDA H. WADE DIR 03/13/2009

Electronic Signature of Signing Officer or Director — Date