

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000058521

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: THOMAS OSBORNE & ASSOCIATES, P.A.

## Current Principal Place of Business:

1517 EAST ROBINSON STREET  
ORLANDO, FL 32801

## New Principal Place of Business:

1132 APPLETON AVENUE  
ORLANDO, FL 32806

## Current Mailing Address:

1517 EAST ROBINSON STREET  
ORLANDO, FL 32801

## New Mailing Address:

1132 APPLETON AVENUE  
ORLANDO, FL 32806

FEI Number: 59-3519872

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OSBORNE, THOMAS P  
1517 EAST ROBINSON STREET  
ORLANDO, FL 32801 US

## Name and Address of New Registered Agent:

OSBORNE, WILLIAM G  
538 E. WASHINGTON ST.  
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: WILLIAM G. OSBORNE

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: OSBORNE, THOMAS P PRES.  
Address: 1517 EAST ROBINSON STREET  
City-St-Zip: ORLANDO, FL 32801

Title: D ( ) Delete  
Name: OSBORNE, DEBRA L SEC.  
Address: 1132 APPLETON AVE.  
City-St-Zip: ORLANDO, FL 32806

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: OSBORNE, THOMAS P PRES.  
Address: 1132 APPLETON AVENUE  
City-St-Zip: ORLANDO, FL 32806

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: THOMAS P. OSBORNE

PRES

04/23/2009

Electronic Signature of Signing Officer or Director

Date