2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Mar 21, 2008 08:00 A Secretary of State **DOCUMENT # P99000001937** 1. Entity Name DAVID L. BRYANT, P.A. Principal Place of Business Mailing Address 4280 DOW RD., STE. 108 4280 DOW RD., STE, 108 MELBOURNE, FL 32934 MELBOURNE, FL 32934 03072008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3553823 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent BRYANT, DAVID L DO NOT WRITE 4280 DOW RD., STE. 108 MELBOURNE, FL 32934 IN THIS SPACE 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 the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME BRYANT, DAVID L STREET ADDRESS 4280 DOW RD., STE. 108 CITY - ST - ZIP MELBOURNE, FL 32934 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

bes not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information curate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director recute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if like appowered. 12. I hereby certify that the information supplied with this filing indicated on this report or supplemental report, of the corporation or the recer or truste

SIGNATURE:

CITY-ST-ZIP

OFFICER OR DIRECTOR