2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000019712

Entity Name: SUSAN M. ZWIESLER, P.A.

FILED Jan 12, 2009 Secretary of State

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

217 N LOIS AVE 4616 . FERDINAND AVE TAMPA, FL 33609 TAMPA, FL 33611

Current Mailing Address: New Mailing Address:

217 N LOIS AVE P.O. BOX 130140 TAMPA, FL 33609 TAMPA, FL 33581- US

FEI Number: 59-3559615 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ZWIESLER, SUSAN M
217 N LOIS AVE
TAMPA, FL 33609 US
ZWIESLER, SUSAN M
4616 S. FERDINAND AVE.
TAMPA, FL 33611 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: 01/12/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 ZWIESLER, SUSAN M
 Name:
 ZWIESLER, SUSAN M

 Address:
 217 N LOIS AVE
 Address:
 4616 S. FERDINAND AVE.

217 N LOIS AVE Address: 4616 S. FERDINAND A
TAMPA, FL 33609 City-St-Zip: TAMPA, FL 33611

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: SUSAN M. ZWIESLER O 01/12/2009