2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000044107

Entity Name: PBOA, INC.

FILED Jan 26, 2009 Secretary of State

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

Current Mailing Address: New Mailing Address:

1800 2ND ST., STE. 909 SARASOTA, FL 34236 1800 2ND ST., STE. 909 E SARASOTA, FL 34236

FEI Number: 65-0923856 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:

WOLFE, RANDOLPH J ESQ. FOLEY & LARDNER 100 N. TAMPA STREET, SUITE 2700 TAMPA, FL 33602 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DC () Delete Title: D (X) Change () Addition

Name: HARRIS, G. WAYNE Name: LAITALA, CHRISTOPHER

Address: 1800 2ND ST STE 909 Address: 165 MADISON STREET 3RD FLOOR

 Address:
 1800 2ND ST., STE. 909
 Address:
 165 MADISON STREET, 3RD FLOOR

 City-St-Zip:
 SARASOTA, FL 34236
 City-St-Zip:
 GREENWICH, CT 06830

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

Name: HARKAVY, JONATHAN Name: HARKAVY, JONATHAN

Address: 1501 WILSON BLVD., STE. 1110 Address: 2233 WISCONSIN AVE NW, SUITE 310

City-St-Zip: ARLINGTON, VA 22209 City-St-Zip: WASHINGTON, DC 20007

Title: DP () Delete Title: CPD (X) Change () Addition Name: ROGERS, MICHAEL T Name: ROGERS, MICHAEL T

Address: 1800 2ND ST., STE. 909 Address: 1800 2ND ST., STE. 909 E
City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34236

Title: VP () Delete Title: CFOT (X) Change () Addition

 Name:
 DIAL, FERRELL
 Name:
 DEMAS, LOU

 Address:
 4119 129TH STREET WEST
 Address:
 1800 2ND ST., STE. 909 E

 City-St-Zip:
 CORTEZ, FL 34215
 City-St-Zip:
 SARASOTA, FL 34236

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

Name: ROSS, HEATHER Name: ROSS, HEATHER

Address: 1501 WILSON BLVD. SUITE 1110 Address: 2233 WISCONSIN AVE NW, SUITE 310

City-St-Zip: ARLINGTON, VA 22209 City-St-Zip: WASHINGTON, DC 20007

 $\label{eq:title: VP (x) Delete Title: VP (X) Change () Addition} \end{minipage}$

 Name:
 COX, SHERRY
 Name:
 COX, SHERRY

 Address:
 13409 3RD AVE., N.E.
 Address:
 1800 2ND ST., STE. 909 E

 City-St-Zip:
 BRADENTON, FL 34212
 City-St-Zip:
 SARASOTA, FL 34236

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: HEATHER ROSS AS 01/26/2009