

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S92520

FILED
May 27, 2009
Secretary of State

Entity Name: COONEY, MATTSON, LANCE, BLACKBURN, RICHARDS & O'CONNOR, P.A.

Current Principal Place of Business:

1600 W. COMMERCIAL BLVD.
SUITE 200
FORT LAUDERDALE, FL 33309 US

New Principal Place of Business:

Current Mailing Address:

1600 W. COMMERCIAL BLVD.
SUITE 200
FORT LAUDERDALE, FL 33309 US

New Mailing Address:

FEI Number: 65-0294635 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MATTSON, MICHAEL C
1600 WEST COMMERCIAL BOULEVARD
SUITE 200
FT. LAUDERDALE, FL 33309 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: RICHARDS, JOHN
Address: 1600 WEST COMMERCIAL BOULEVARD, #200
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: VP () Delete
Name: COONEY, DAVID F
Address: 1600 WEST COMMERCIAL BOULEVARD, #200
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: P () Delete
Name: MATTSON, MICHAEL C
Address: 1600 WEST COMMERCIAL BOULEVARD, #200
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: VP () Delete
Name: BLACKBURN, ACE J
Address: 1600 WEST COMMERCIAL BOULEVARD, #200
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: S () Delete
Name: O'CONNOR, DENNIS R
Address: 111 N. ORANGE AVENUE, SUITE 850
City-St-Zip: ORLANDO, FL 32801 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHN RICHARDS

VP

05/27/2009

Electronic Signature of Signing Officer or Director

Date