

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S94800

FILED
Apr 23, 2009
Secretary of State

Entity Name: BARBEE AND ASSOCIATES, INC.

Current Principal Place of Business:

4855 W. HILLSBORO BLVD.
SUITE B4
COCONUT CREEK, FL 33073 US

Current Mailing Address:

4855 W. HILLSBORO BLVD.
SUITE B4
COCONUT CREEK, FL 33073 US

New Principal Place of Business:

401 E. LAS OLAS BLVD.
SUITE 130-142
FORT LAUDERDALE, FL 33301 US

New Mailing Address:

401 E. LAS OLAS BLVD.
SUITE 130-142
FORT LAUDERDALE, FL 33301 US

FEI Number: 65-0296553

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARBEE, ALAN R
4855 W. HILLSBORO BLVD.
SUITE B4
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

BARBEE, ALAN R
401 E. LAS OLAS BLVD.
SUITE 130-142
FORT LAUDERDALE, FL 33301 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:

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: BARBEE, ALAN R
Address: 4738 HOLLY DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VP () Delete
Name: HELLER, JOHN L
Address: 3326 SW 19TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 L. HELLER

VP

04/23/2009

Electronic Signature of Signing Officer or Director

Date