

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V00693

FILED  
Jan 13, 2009  
Secretary of State

Entity Name: MORELAND & MENDEZ, P.A.

## Current Principal Place of Business:

202 LOOKOUT PLACE  
MAITLAND, FL 32751

## New Principal Place of Business:

202 LOOKOUT PLACE  
STE 200  
MAITLAND, FL 32751

## Current Mailing Address:

202 LOOKOUT PLACE  
MAITLAND, FL 32751

## New Mailing Address:

202 LOOKOUT PLACE  
STE 200  
MAITLAND, FL 32751

FEI Number: 59-3098910

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MENDEZ, CELIA M MS.  
202 LOOKOUT PLACE  
MAITLAND, FL 32751 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MORELAND, CAREY L.,  
Address: 202 LOOKOUT  
City-St-Zip: MAITLAND, FL 32751

Title: VPT ( ) Delete  
Name: MENDEZ, CELIA M.,  
Address: 202 LOOKOUT PLACE  
City-St-Zip: MAITLAND, FL 32751

Title: S ( ) Delete  
Name: MENDEZ, FRANCIS,  
Address: 202 LOOKOUT PLACE  
City-St-Zip: MAITLAND, FL 32751

## 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:

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: CELIA M. MENDEZ

VP

01/13/2009

Electronic Signature of Signing Officer or Director

Date