

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V02063

FILED
Mar 24, 2009
Secretary of State

Entity Name: ROBERT ABRAHAM, P.A.

Current Principal Place of Business:

149 S RIDGEWOOD AVENUE
STE 500
DAYTONA BEACH, FL 32114

Current Mailing Address:

149 S RIDGEWOOD AVENUE
STE 500
DAYTONA BEACH, FL 32114

New Principal Place of Business:

220 S RIDGEWOOD AVENUE
STE 200
DAYTONA BEACH, FL 32114

New Mailing Address:

220 S RIDGEWOOD AVENUE
STE 200
DAYTONA BEACH, FL 32114

FEI Number: 59-3097038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABRAHAM, ROBERT
149 S RIDGEWOOD AVENUE
STE 500
DAYTONA BEACH, FL 32114 US

Name and Address of New Registered Agent:

ABRAHAM, ROBERT
220 S RIDGEWOOD AVENUE
STE 200
DAYTONA BEACH, FL 32114 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:

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: ABRAHAM, ROBERT
Address: 149 S RIDGEWOOD AVE STE 500
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D () Delete
Name: ABRAHAM, ROBERT
Address: 149 S RIDGEWOOD AVE STE 500
City-St-Zip: DAYTONA BEACH, FL 32114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: ABRAHAM, ROBERT
Address: 220 S RIDGEWOOD AVE STE 200
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D (X) Change () Addition
Name: ABRAHAM, ROBERT
Address: 220 S RIDGEWOOD AVE STE 200
City-St-Zip: DAYTONA BEACH, FL 32114

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: ROBERT ABRAHAM

PRES

03/24/2009

Electronic Signature of Signing Officer or Director

Date