

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V17031

FILED
Feb 26, 2009
Secretary of State

Entity Name: H. ELIZABETH WOOD, P.A.

Current Principal Place of Business:

3272 WINDMILL CIR
CANTONMENT, FL 32533

New Principal Place of Business:

Current Mailing Address:

3272 WINDMILL CIR
CANTONMENT, FL 32533

New Mailing Address:

FEI Number: 59-3107416

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOOD, BETH
3272 WINDMILL CIR
CANTONMENT, FL 32533 US

Name and Address of New Registered Agent:

WOOD, BETH
3272 WINDMILL CIR
CANTONMENT, FL 32533 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: BETH WOOD

02/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WOOD, GARY S.,
Address: 3272 WINDMILL CIR
City-St-Zip: CANTONMENT, FL

Title: D () Delete
Name: WOOD, BETH,
Address: 3272 WINDMILL CIR
City-St-Zip: CANTONMENT, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WOOD, GARY
Address: 3272 WINDMILL CIR
City-St-Zip: CANTONMENT, FL

Title: D (X) Change () Addition
Name: WOOD, BETH
Address: 3272 WINDMILL CIR
City-St-Zip: CANTONMENT, FL

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: BETH WOOD

P

02/26/2009

Electronic Signature of Signing Officer or Director

Date