2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006
Secretary of State

DOCUMENT# 535723

Entity Name: KRUPNICK CAMPBELL MALONE BUSER SLAMA HANCOCK LIBERMAN & MCKEE, P.A.

Current Principal Place of Business:

700 S.E. THIRD AVENUE
FT. LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

700 S.E. THIRD AVENUE
FT. LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 59-1512204 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, JAMES B ESQ.
GUNSTER, YOAKLEY & STEWART, P.A.
500 E. BROWARD BLVD., SUITE 1400
FT. LAUDERDALE, FL 33316 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:	VD	( ) Delete
Name:	CABRERA, IVAN F	
Address:	7225 S PRESTWICK PLACE	
City-St-Zip:	MIAMI LAKES, FL 33014	
Title:	TD	( ) Delete
Name:	CAMPBELL, WALTER G JR.	
Address:	1844 COLONIAL DRIVE	
City-St-Zip:	CORAL SPRINGS, FL 33071	
Title:	VD	( ) Delete
Name:	HANCOCK, KELLY D.	
Address:	3100 NE 42ND ST	
City-St-Zip:	FT LAUDERDALE, FL 33308	
Title:	VD	( ) Delete
Name:	SLAMA, JOSEPH J	
Address:	638 MIDDLE RIVER DRIVE	
City-St-Zip:	FORT LAUDERDALE, FL 33304	
Title:	PD	( ) Delete
Name:	MALONE, KEVIN A.	
Address:	1701 SE 7TH ST	
City-St-Zip:	FT LAUDERDALE, FL 33316	
Title:	SD	( ) Delete
Name:	BUSER, THOMAS E	
Address:	2862 BANYAN BLVD., CIR. N.W.	
City-St-Zip:	BOCA RATON, FL 33431	

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

I hereby certify that the information supplied with this filing does not qualify for the 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: KEVIN A. MALONE PD 04/13/2006

Electronic Signature of Signing Officer or Director — Date