2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2007
Secretary of State

DOCUMENT# 692612

Entity Name: KOOGLER AND ASSOCIATES, INC.

Current Principal Place of Business:

4014 NW 13TH ST.
GAINESVILLE, FL 32609

New Principal Place of Business:

4014 NW 13TH ST.
GAINESVILLE, FL 326091923

Current Mailing Address:

4014 NW 13TH ST.
GAINESVILLE, FL 32609

New Mailing Address:

4014 NW 13TH ST.
GAINESVILLE, FL 326091923

FEI Number: 59-2106049 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KOOGLER, JOHN B P
4014 NW 13TH STREET
GAINESVILLE, FL 326091923 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: TD ( ) Delete
Name: KOOGLER, JOHN B P
Address: 2240 N.W. 7TH LN.
City-St-Zip: GAINESVILLE, FL 32603 US

Title: VP ( ) Delete
Name: CULLEN, STEVEN C VP
Address: 125 HALF MOON TRAIL
City-St-Zip: MELROSE, FL 32666 US

Title: VP ( ) Delete
Name: LAMB, ELENA E VP
Address: 16057 NW 243RD WAY
City-St-Zip: HIGH SPRINGS, FL 32643 US

Title: VP ( ) Delete
Name: LEE, MAXWELL R VP
Address: 2920 NW 29TH STREET
City-St-Zip: GAINESVILLE, FL 32605 US

Title: VP ( ) Delete
Name: RAVAL, PRADEEP A VP
Address: 3606 NW 63RD PLACE
City-St-Zip: GAINESVILLE, FL 32653 US

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:

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: ELENA E. LAMB V/P 01/19/2007
Electronic Signature of Signing Officer or Director — Date