

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13886

FILED  
Feb 07, 2007  
Secretary of State

Entity Name: DAVIES, HOUSER & SECREST, CPA, P.A.

## Current Principal Place of Business:

535 DELANNOY AVENUE  
COCOA, FL 32922 US

## New Principal Place of Business:

## Current Mailing Address:

POST OFFICE BOX 129  
COCOA, FL 32923 US

## New Mailing Address:

FEI Number: 59-2046542      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHRISTENSEN, EDWARD R MR  
535 DELANNOY AVENUE  
COCOA, FL 32922 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: DST ( ) Delete  
Name: CHRISTENSEN, EDWARD R  
Address: 548 SAWGRASS CIRCLE  
City-St-Zip: MELBOURNE, FL 32940 US

Title: DP ( ) Delete  
Name: ELLIS, STEPHEN A  
Address: 1524 PALMER DRIVE  
City-St-Zip: TITUSVILLE, FL 32780 US

Title: DVP ( ) Delete  
Name: RUSSELL, TODD M  
Address: 4085 TURTLEMOUND RD  
City-St-Zip: MELBOURNE, FL 32934 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:

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: EDWARD R CHRISTENSEN

DST

02/07/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date