2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 09, 2006 08:00 AM Secretary of State

Applied For

Not Applicable

DOCUM	IENT#	H3414	ļ 2
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1. Entity Name

GREEN, ACKERMAN & FROST, P.A.



Principal Place of Business

Mailing Address

1200 N. FEDERAL HIGHWAY

1200 N FEDERAL HIGHWAY SUITE 301

SUITE 301 BOCA RATON, FL 33432

BOCA RATON, FL 33432



DO NOT WRITE IN THIS SPACE

01052006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2477177

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GREEN, JAY B 1200 N FEDERAL HIGHWAY SUITE 301 BOCA RATON, FL 33432

SIGNATURE:

DO NOT WRITE IN THIS SPACE

8. The above the obligation	e named entity submits this statement for the p tions of registered agent.	ourpose of changing its regist	ered office or	registered agent, or be	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature typed or printed name of registered agent and kills	foodfashla (NOTE Board)	and board many	e required when rematating)	200	
	alguature typed or printed name or registered again, and title	appicable (NOTE Hegisi	ered without signatur	e required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finantification.			\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDS GREEN, JAY B. 1200 N FEDERAL HIGHWAY, SUITE : BOCA RATON, FL 33432	301		######################################		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GREEN, JAY B. 1200 N FEDERAL HIGHWAY, SUITE : BOCA RATON, FL 33432	301				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ACKERMAN, RAND 1200 N FEDERAL HIGHWAY, SUITE : BOCA RATON, FL 33432	301				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with amenderss, with all other like empowered.