

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**


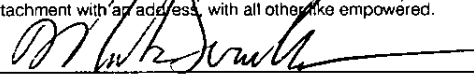
**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90386 011 \*\*\*\*61.25

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04192007 Chg-NP CR2E037 (12/06)

<b>DOCUMENT # N47117</b>					
<b>1. Entity Name</b> FLORIDA PUBLIC INTEREST RESEARCH GROUP CITIZEN LOBBY, INC.					
<b>Principal Place of Business</b> 926 E PARK AVE TALLAHASSEE, FL 32301 US		<b>Mailing Address</b> 926 E PARK AVE TALLAHASSEE, FL 32301 US			
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		<b>4. FEI Number</b> 59-3109773	
Zip		Country		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>			<b>7. Name and Address of New Registered Agent</b>		
FERRULO, MARK 926 E PARK AVE TALLAHASSEE, FL 32307			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b>					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2007</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		<b>Make check payable to</b> <b>Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE	SD	<input type="checkbox"/> Delete	TITLE	Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LINDBERG, SUSANNAH		NAME		
STREET ADDRESS	1331 PALMETTO DR.		STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK, FL 32789		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PERRY, CARL		NAME		
STREET ADDRESS	6055 MAJORS LANE, #3		STREET ADDRESS		
CITY-ST-ZIP	COLUMBIA, MD		CITY-ST-ZIP		
TITLE	STD	<input type="checkbox"/> Delete	TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRILSCH, RICHARD		NAME		
STREET ADDRESS	218 D STREET SE		STREET ADDRESS		
CITY-ST-ZIP	WASHINGTON, DC 20003		CITY-ST-ZIP		
TITLE	CD	<input type="checkbox"/> Delete	TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERRULO, MARK		NAME		
STREET ADDRESS	704 W. MADISON ST		STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE, FL 32304		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	Naomi Roth	
STREET ADDRESS			STREET ADDRESS	114 State St., Suite 200	
CITY-ST-ZIP			CITY-ST-ZIP	Boston, MA 02109	
TITLE		<input type="checkbox"/> Delete	TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	Steve Biel	
STREET ADDRESS			STREET ADDRESS	218 D ST SE	
CITY-ST-ZIP			CITY-ST-ZIP	Washington, DC 20003	
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</b>					
<b>SIGNATURE:</b> 			4/19/07		850-224-5944
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>		<small>Daytime Phone #</small>