

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000021752

FILED
Jan 08, 2007
Secretary of State

Entity Name: HILLEY & WYANT-CORTEZ, P.A.

Current Principal Place of Business:

860 US HWY ONE
SUITE 108
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

860 US HWY ONE
SUITE 108
NORTH PALM BEACH, FL 33408

New Mailing Address:

FEI Number: 02-0554342 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILLEY, V. DONALD
860 US HWY ONE
SUITE 108
NORTH PALM BEACH, FL 33408 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: PD () Delete
Name: HILLEY, V. DONALD
Address: 860 US HWY ONE, STE 108
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: WYANT-CORTEZ, V. CLAIRE
Address: 860 US HIGHWAY ONE, SUITE 108
City-St-Zip: NORTH PALM BEACH, FL 33408

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: V. DONALD HILLEY

P

01/08/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date