## 2007 FOR PROFIT CORPORATION

## **FILED ANNUAL REPORT** Apr 05, 2007 08:00 All Secretary of State **DOCUMENT # P97000070216** 1. Entity Name BERNARD ECK, P.A. Principal Place of Business Mailing Address 4547 30 AVE N 4547 30 AVE N ST PETERSBURG, FL 33713-2109 US ST PETERSBURG, FL 33713 01132007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3465338 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SMITH, WALTER E DO NOT WRITE 1301 4 ST N ST PETERSBURG, FL 33701 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable, DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWIT FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME ECK, BERNARD L STREET ADDRESS 4547 30 AVE N 000000690298 04/11/07-80069-018 150.00 CITY-ST-ZIP ST PETERSBURG, FL 33713 TITLE **ECK, SHIRLEY A** NAME STREET ADDRESS 4547 30 AVE N CHY-S1-ZIP ST PETERSBURG, FL 33713 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE 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 an address, with all other like empowered.

SIGNATURE: S

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP