


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007 08:00 AM
Secretary of State

DOCUMENT # P98000005758

1. Entity Name
NOBLE & NOBLE, P.A., C.P.A.



Principal Place of Business
1177 LOUISIANA AVENUE STE. 109
WINTER PARK, FL 32789

Mailing Address
1177 LOUISIANA AVENUE STE. 109
WINTER PARK, FL 32789

DO NOT WRITE IN THIS SPACE



04302007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3483583

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

NOBLE, EMERSON C
1177 LOUISIANA AVENUE STE. 109
WINTER PARK, FL 32789

DO NOT WRITE 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-instating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NOBLE, JULIA N 1177 LOUISIANA AVENUE STE. 109 WINTER PARK, FL 32789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NOBLE, EMERSON C 1177 LOUISIANA AVENUE STE. 109 WINTER PARK, FL 32789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000753154
 05/22/07-80007-021 150.00

DO NOT WRITE IN THIS SPACE

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 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 information provided.

SIGNATURE:  **Emerson C. Noble**

Date: **4/30/07** Daytime Phone #: **407-647-5262**