2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F05000005769

1. Entity Name

PAUL B. KREBS & ASSOCIATES, INC.

Principal Place of Business

2100 RIVER HAVEN DRIVE, SUITE 100 BIRMINGHAM, AL 35244 Mailing Address

2100 RIVER HAVEN DRIVE, SUITE 100 BIRMINGHAM, AL 35244 FILED Aug 21, 2006 08:00 Al Secretary of State



DO NOT WRITE IN THIS SPACE

08092006 No Chg-P CR2E034 (11/05)

4. FEI Number 63-0597292

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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					
				required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		Blection Campaign Fina Trust Fund Contribution		\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS			2000	######################################	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HARRIS, RONALD U 808 WOOD POPPY COURT BIRMINGHAM, AL 35244				
TITLE	VS				

HUFFMAN, GARY L STREET ADDRESS 619 CAMDEN RIDGE CITY-ST-ZIP BIRMINGHAM, AL 35226 TITLE SRV NAME GRAY, ROBERT W STREET ADDRESS 355 STONE BROOK CIRCLE CITY-ST-ZIP BIRMINGHAM, AL 35226 TITLE SRV NAME SWEITZER, JOHN M STREET ADDRESS 1726 MOUNT PARAN ROAD NW CITY-ST-ZIP ATLANTA, GA 30327 TITLE NAME HOKE, SCOTT STREET ADDRESS 127 LORENA LANE CITY-ST-ZIP BIRMINGHAM, AL 35213 TITLE ROEBUCK, PAUL

728 DIVIDING RIDGE DRIVE

BIRMINGHAM, AL 35244

DO NOT WRITE IN THIS SPACE

12. Thereby 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 attachprent with an address, with all place like empowered.

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ZONALD U. HABUS 8/17/06 205-987-74

Daytme Phone