2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2007 08:00 A
Secretary of State

DOCUMENT # 346524

1. Entity Name
ED STARKEY & ASSOCIATES, INC.

Principal Place of Business	Mailing Address
1510 BERNITA ST. JACKSONVILLE, FL 32211	1510 BERNITA ST. JACKSONVILLE, FL 32211

02242007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1264712

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

STARKEY, DANE E.
1510 BERNITA ST
JACKSONVILLE, FL 32211

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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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

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

U00000656639
03/14/07-80037-005 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	STARKEY, EDWARD D
STREET ADDRESS	5403 CAPELLA COURT
CITY-ST-ZIP	ATLANTIC BEACH, FL 32233
TITLE	ATD
NAME	STARKEY, DORA C
STREET ADDRESS	5403 CAPELLA COURT
CITY-ST-ZIP	ATLANTIC BEACH, FL 32233
TITLE	PTD
NAME	STARKEY, DANE E
STREET ADDRESS	1268 QUEENS ISLAND COURT
CITY-ST-ZIP	JACKSONVILLE, FL 32225
TITLE	VSD
NAME	STARKEY, MARK S
STREET ADDRESS	4431 SEABREEZE DRIVE
CITY-ST-ZIP	JACKSONVILLE, FL 32250
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 like empowered.

SIGNATURE: Dane E. Starkey Dane E. Starkey 3/1/07 904/743-1432
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #