2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 252486

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

JACKSONVILLE BEACH, FL 32250

() Delete

JACKSONVILLE BEACH, FL 32250

BENNINGSEN, KAREN S

1590 EVANS DR. S

FILED Jan 25, 2007 Secretary of State

| Entity Name: LAY, PITMAN & ASSOCIATES, INC. | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|--------------------------|----------------------------------------------------------------|----------------------------------------------|--|
| | | | | | |
| Current Principal Place of Business: | | | New Principal Place of | Business: | |
| | ANTIC BOULEV /ILLE, FL 32225 | | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| 13891 ATLANTIC BOULEVARD JACKSONVILLE, FL 32225 | | | | | |
| FEI Number: | 59-0946693 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired (X) | |
| Name and Address of Current Registered Agent: | | | Name and Address of N | Name and Address of New Registered Agent: | |
| PITTMAN, MATTHEW E 1434 SUN MARSH DR JACKSONVILLE, FL 32225 US | | | PITMAN, MATTHEW E 1434 SUN MARSH DR JACKSONVILLE, FL 322 | | |
| 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: MATTHEW E. PITMAN | | | | 01/25/2007 | |
| Electronic Signature of Registered Agent | | | nt | Date | |
| Election Campaign Financing Trust Fund Contribution (). | | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | V () De HURST, RODNEY 14635 LAGOON D JACKSONVILLE B | R., RIVE | Title: () Name: Address: City-St-Zip: |) Change ()Addition | |
| Title: Name: Address: City-St-Zip: | PD () De PITMAN, MATTHE' 1434 SUN MARSH JACKSONVILLE, F | W E DRIVE | Title: () Name: Address: City-St-Zip: |) Change ()Addition | |
| Title: Name: | V () De WEISFLOG, JAME | | Title: () Name: |) Change ()Addition | |

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: MATTHEW E. PITMAN PD 01/25/2007

(X) Change () Addition

HENNINGSEN, KAREN S

JACKSONVILLE BEACH, FL 32250

1590 EVANS DR. S