


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT # 354163 1. Entity Name HILBORN, WERNER, CARTER & ASSOCIATES, INC.	
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Principal Place of Business 1627 SOUTH MYRTLE AVE. CLEARWATER, FL 33756-1131	Mailing Address 1627 SOUTH MYRTLE AVE. CLEARWATER, FL 33756-1131
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DO NOT WRITE IN THIS SPACE



01152007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1272893	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BLANTON, ROBERT R 685 WESTFIELD CT. DUNEDIN, FL 34698
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BLANTON, ROBERT R 685 WESTFIELD CT DUNEDIN, FL 34698
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V NOLAN, RICHARD S. 12720 91ST AVE N SEMINOLE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V FRANCIS, SCOTT S 3109 SWAN LANE SAFETY HARBOR, FL 34695
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V GUSTAFSON, JOHN 2594 KNOLL ST. E. PALM HARBOR, FL 34683
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST BLANTON, MARC R 1460 DEXTER DR CLEARWATER, FL 33756
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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01/22/07-80046-023 150.00

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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 like empowered.

SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Robert R. Blanton	01/16/07	(727) 584-8151
		<small>Date</small>	<small>Daytime Phone #</small>