2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 373228

FILED Apr 28, 2006 Secretary of State

Entity Name: POSEY PROFESSIONAL SERVICES, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
5314-A FRANK HOUGH RD. PANAMA CITY, FL 32404					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
5314-A FRANK HOUGH RD. PANAMA CITY, FL 32404					
FEI Number:	59-3018069	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
POSEY, GARY M. 5314 FRANK HOUGH RD. PANAMA CITY, FL 32404 US					
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:					
Electronic Signature of Registered Agent			t	Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () POSEY, GARY N 5314 FRANK HO PANAMA CITY, F	OUGH RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () POSEY,BRENDA 5314 FRANK HO PANAMA CITY, F	OUGH RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	POSEY, GARY N 306 HIBISCOUS		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () POSEY, RYAN C 407 MISSOURI A LYNN HAVEN, FI	AVE	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	D () POSEY, ROBER 2311 DON ANDR TALLAHASSEE,	RES AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () POSEY, CORY N 2311 DON ANDR TALLAHASSEE,	RES AVENUE	Title: Name: Address: City-St-Zip:	() 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					

SIGNATURE: GARY M POSEY PD

above, or on an attachment with an address, with all other like empowered.