2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 18, 2007 08:00 A Secretary of State

ANNUAL KEPURI		
DOCUMENT # 463947 1. Entity Name JUDGE & WARREN, P.A.		
Principal Place of Business 444 SEABREEZE BLVD STE 615	Mailing Address 444 SEABREEZE BLVD STE 615	
DAYTONA BEACH, FL 32118 US	DAYTONA BEACH, FL 32118	US

changed, or on an attachme

SIGNATURE:



CR2E034 (11/05)

No Chg-P

4/16/07

(386)253-5612

04122007

DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number 59-1559852 Not Applicable \$8,75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WARREN, DAN R. DO NOT WRITE 444 SEABREEZE BLVD **STE 615** IN THIS SPACE DAYTONA BEACH, FL 32118 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent cignature required when reinstaling) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME WARREN, DAN R STREET ADDRESS 444 SEABREEZE BLVD., STE. 615 DAYTONA BEACH, FL 32118 000000714330 04/27/07-80017-824 150.00 CITY-ST-ZIP TITLE MANNING, LINDA L NAME STREET ADDRESS 2379 OLD TOMOKA ROAD CITY-ST-ZIP ORMOND BEACH, FL 32174 THLE NAME STREET ADDRESS DO NOT WRITE CiTY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TATLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if