2007 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Mar 16, 2007 08:00-Al **DOCUMENT # 481474 Secretary of State** 1. Entity Name JOHŃ W. TANNER P.A. Mailing Address Principal Place of Business 5000 JOHN ANDERSON HWY PO BOX 1628 FLAGLER BEACH, FL 32136 FLAGLER BEACH, FL 32136 US CR2E034 (11/05) 02082007 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For Not Applicable 59-1610428 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE TANNER, JOHN W 5000 JOHN ANDERSON HWY FLAGLER BEACH, FL 32136 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 lamiliar with, and accept the obligations of registered agent. SIGNATURE (NOTE, Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150,00 Added to Fees UNONONGG8745 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 27/07-80043-10. OFFICERS AND DIRECTORS TITLE TANNER, JOHN W NAME STREET ADDRESS 5000 JOHN ANDERSON HWY CITY-ST-ZIP FLAGLER BEACH, FL 32136 TILLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE THE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this titing 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:

THE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST-ZIP

TOAN W. TANKER