

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 506918

FILED
Apr 27, 2007
Secretary of State

Entity Name: PDR CERTIFIED PUBLIC ACCOUNTANTS, INC.

Current Principal Place of Business:

29605 U.S. 19 N., SUITE 140
CLEARWATER, FL 33761

New Principal Place of Business:

29750 U.S. 19 N., SUITE 101
CLEARWATER, FL 337611530

Current Mailing Address:

29605 U.S. 19 N., SUITE 140
CLEARWATER, FL 33761

New Mailing Address:

29750 U.S. 19 N., SUITE 101
CLEARWATER, FL 337611530

FEI Number: 59-1687531

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRICE, WILLIAM E
29605 U.S. 19 N., SUITE 140
CLEARWATER, FL 337611538 US

Name and Address of New Registered Agent:

PRICE, WILLIAM E
29750 U.S. 19 N., SUITE 101
CLEARWATER, FL 337611530 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: _____

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PRICE, WILLIAM E,
Address: 29605 US HWY 19 N #140
City-St-Zip: CLEARWATER, FL

Title: S () Delete
Name: MATTEI, KIMBERLY A.,
Address: 29605 U.S. 19 N., SUITE 140
City-St-Zip: CLEARWATER, FL 346219196

Title: V () Delete
Name: NANCY M RIDENOUR,
Address: 29605 U.S. 19 N., SUITE 140
City-St-Zip: CLEARWATER, FL 346219196

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PRICE, WILLIAM E,
Address: 29750 US HWY 19 N #101
City-St-Zip: CLEARWATER, FL 337611530

Title: S (X) Change () Addition
Name: MATTEI, KIMBERLY A.,
Address: 29750 U.S. 19 N., SUITE 101
City-St-Zip: CLEARWATER, FL 337611530

Title: V (X) Change () Addition
Name: NANCY M RIDENOUR,
Address: 29750 U.S. 19 N., SUITE 101
City-St-Zip: CLEARWATER, FL 337611530

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: WILLIAM E. PRICE

PD

04/27/2007

Electronic Signature of Signing Officer or Director

Date