## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

**DOCUMENT # 523567** 

1. Entity Name MYER AND SIMON ACCOUNTANTS, INC.



**FILED** Apr 20, 2006 08:00 AN Secretary of State

CR2E034 (11/05)

Principal Place of Business 3905 S. SHADE AVE.

PO BOX 5305 SARASOTA, FL 34277 Mailing Address

3905 S. SHADE AVE. PO BOX 5305 SARASOTA, FL 34277



## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Applied For 4. FEI Number 59-1784888 Not Applicable \$8.75 Additional

5. Certificate of Status Desired П Fee Required

SIMON, STEPHEN 3905 S. SHADE AVE SARASOTA, FL 33579

## DO NOT WRITE IN THIS SPACE

No Chg-P

04242006

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  Signature typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE					
		Election Campaign Financ Trust Fund Contribution.	cing 🔲	\$5.00 May Be Added to Fees	U00000520915 05/02/06-80114-002 150.00
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIREC PD SIMON, STEPHEN 3905 S. SHADE AVE SARASOTA, FL 33579,	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP					NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-2IP					
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 faport 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 after like empowered.					