2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 524647

Title:

Name:

Address:

City-St-Zip:

Entity Name: E. W. SIVER AND ASSOCIATES, INC.

FILED Apr 26, 2007 Secretary of State

		21(7)(14)27(0000)7(120, 1140.			
Current Pi	rincipal Place	of Business:	New Principal Place of Business:		
9400 FOUF #119	RTH ST. N.				
	RSBURG, FL	33702			
Current Mailing Address:			New Mailing Address:		
#119	RTH ST. N.	22702			
	RSBURG, FL		FFI November Net Applicable ()	Cardiffered of Status Basined ()	
FEI Number:	59-1/12226	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
9400 4TH \$ 119	N, GEORGE W ST N :SBURG, FL 3				
	named entity see of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () MARSHALL, JA 9400 4TH ST N ST PETERSBU		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () SIVER, ROBER 114 GIRALDA E ST PETERSBU	BLVD. N.E.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ERICKSON, GE 9400- 4TH STR	Delete CORGE W EET NORTH #119 BURG, FL 33702	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 above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: GEORGE W. ERICKSON VTSD 04/26/2007

() Delete

SADLER, BRENDA

9400 4TH STREET NORTH

ST PETERSBURG, FL 33702

(X) Change () Addition

GORDON, KATHLEEN

9400 4TH STREET NORTH

ST PETERSBURG, FL 33702