

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 576269

FILED  
Apr 05, 2007  
Secretary of State

Entity Name: BISHOP & BISHOP, INC.

**Current Principal Place of Business:**

1303 MISSION RD.  
NEW SMYRNA BEACH, FL 32168

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1375  
NEW SMYRNA BEACH, FL 32170

**New Mailing Address:**

FEI Number: 59-1866699

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BISHOP, CLYDE  
1303 MISSION RD.  
NEW SMYRNA BEACH, FL 32168 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BISHOP, CLYDE,  
Address: 1303 MISSION RD.  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: T ( ) Delete  
Name: BISHOP, FRANKLIN ELW, OOD  
Address: 1113 W. CANAL ST.  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: S ( ) Delete  
Name: GORDON, IRENE R.,  
Address: 313 TRUDGEON DR.  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: CLYDE BISHOP

P

04/05/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date