

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 12, 2007 08:00 A
Secretary of State

DOCUMENT # 590013

1. Entity Name
STUART J. WITTEN AND ASSOCIATES, INC.



Principal Place of Business

**7624 SW 146TH CT
MIAMI, FL 33183**

Mailing Address

**7624 SW 146TH CT
MIAMI, FL 33183**



02042007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1862675

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WITTEN, STUART
7624 SW 146TH CT
MIAMI, FL 33183**

**DO NOT WRITE
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 familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P**
NAME **WITTEN, STUART J.**
STREET ADDRESS **7624 SW 146TH CT**
CITY-ST-ZIP **MIAMI, FL 33183**

TITLE **V**
NAME **WITTEN, LEON**
STREET ADDRESS **7624 SW 146TH CT**
CITY-ST-ZIP **MIAMI, FL 33183**

TITLE **DST**
NAME **WITTEN, GWEN C**
STREET ADDRESS **7624 SW 146TH CT**
CITY-ST-ZIP **MIAMI, FL 33183**

TITLE
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U000000633401
02/21/07-80061-008 150.00

**DO NOT WRITE
IN THIS SPACE**

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 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: Stuart J. Witten **STUART J WITTEN** 2/9/07 305-970-4981
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #