


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 09, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # 602539 1. Entity Name TROUTMAN, WILLIAMS, IRVIN, GREEN, HELMS & POLICH, P.A.	
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Principal Place of Business 311 W. FAIRBANKS AVE. WINTER PARK, FL 32789	Mailing Address 311 W. FAIRBANKS AVE. WINTER PARK, FL 32789
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01052006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-1307346	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  TROUTMAN, RUSSELL 311 W. FAIRBANKS AVE. WINTER PARK, FL 32789
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**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 _____ <small>Signature, typed or printed name of registered agent and title is applicable. (NOTE: Registered Agent signature required when reappointing)</small>	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TROUTMAN, RUSSELL 311 W. FAIRBANKS AVE. WINTER PARK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD IRVIN, PAUL B. 311 W. FAIRBANKS AVE. WINTER PARK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WILLIAMS, JOSEPH H. 311 W. FAIRBANKS AVE. WINTER PARK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREEN, ROBERT F 311 W FAIRBANKS AVE WINTER PARK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1100000379248  
01/10/06-80014-012 150.00

**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:  Russell Troutman, President	Date: 1/5/06	Daytime Phone #: 407-647-2277
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