


2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 603960 1. Entity Name GOULD, COOKSEY, FENNELL, O'NEILL, MARINE, CARTER & HAFNER, P.A.						FILED 06 MAR -1 PM 1:01 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 979 BEACHLAND BLVD VERO BEACH, FL 32963-1688				Mailing Address 979 BEACHLAND BLVD VERO BEACH, FL 32963-1688			
2. Principal Place of Business Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
6. Name and Address of Current Registered Agent MARINE, CHRISTOPHER H. 1545 SHORELANDS DRIVE EAST VERO BEACH, FL 32963				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City			
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.				4. FEI Number 59-1426911			
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)				DATE			
Amended AR is \$61.25				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC COOKSEY, BYRON T 2102 VICTORY BLVD VERO BEACH, FL			TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BRIAN J. CONNELLY 3010 NASSAU DRIVE VERO BEACH FL 32960		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MARINE, CHRISTOPHER H. 1545 SHORELANDS DRIVE EAST VERO BEACH, FL 32963			TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV SANDRA G. RENNICK 2150 CORDOVA AVENUE VERO BEACH FL 32960		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV O'NEILL, EUGENE J 979 BEACHLAND BLVD VERO BEACH, FL 32963			800067977678 03/16/06--01021--021 **61.25			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HAFNER, TROY B 517 EAST CAUSEWAY BLVD VERO BEACH, FL 32963			Change Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT FENNELL, TODD W 1435 SHORELANDS DRIVE WEST VERO BEACH, FL 32963			Change Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV CARTER, DAVID M 1575 GRACEWOOD LN VERO BEACH, FL 32963			Change Addition			
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: <i>Jodi W Fennell</i>				Date: <i>2/21/06</i>		Daytime Phone #: <i>772 2311100</i>	