## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 604020** 

FILED Apr 11, 2007 Secretary of State

Entity Name: BUNNELL WOULFE KIRSCHBAUM KELLER MCINTYRE GREGOIRE & KLEIN, P.A.

Current Principal Place of Business:					New Principal Place of Business:		
ONE FINANCIAL PLAZA, SUITE #900 100 SOUTHEAST 3RD AVENUE FORT LAUDERDALE, FL 33394 US							
Current Mailing Address:					New Mailing Address:		
ONE FINANCIAL PLAZA, SUITE #900 100 SOUTHEAST 3RD AVENUE FORT LAUDERDALE, FL 33394 US							
FEI Number:	59-1432412	FEI Numl	per Applied For ( )	FEI Numi	ber Not Applicable ( )	Certificate of Status Desired (X)	
Name and	Address of C	urrent Re	gistered Agent:		Name and Address	of New Registered Agent:	
WOULFE, RICHARD T ONE FINANCIAL PLAZA, SUITE #900 100 SOUTHEAST 3RD AVENUE FORT LAUDERDALE, FL 33394 US							
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:							
	Electroni	c Signatu	re of Registered Agen	t		Date	
Election Campaign Financing Trust Fund Contribution (X).							
OFFICERS AND DIRECTORS:				į	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () WOULFE, RICHA 100 SOUTHEAS FORT LAUDERD	T 3RD AVE	,	1	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	SD () KELLER, D. DAV 100 SOUTHEAS' FORT LAUDERD	T 3RD AVE		1	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VPD () KIRSCHBAUM, J 100 SOUTHEAS FORT LAUDERE	T 3RD AVE		1	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TD (X) MCINTYRE, W. I 100 SOUTHEAS FORT LAUDERE	T 3RD AVE	*	1	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VPD () GREGOIRE, NAI 100 SOUTHEAS FORT LAUDERE	T 3RD AVE	*	1	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VPD () KLEIN, MATHEW 100 SE 3RD AVE FORT LAUDERD	E 900	3394	1	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							

Electronic Signature of Signing Officer or Director

above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD T. WOULFE

Date

04/11/2007

PD