2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 611603

FILED Jan 31, 2007 Secretary of State

Entity Name: FINANCIAL RESEARCH ASSOCIATES, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
203 AVE A STE 202 WINTER H	NW IAVEN, FL 33	3881			
Current Mailing Address:		New Mailing Address:			
203 AVE A STE 202 WINTER H	NW IAVEN, FL 33	3881			
El Number:	59-1971394	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
MULLIS. H	AROLD W. J	₹.			
I01 EAST I 2700 BARN FAMPA, FL The above n the State	of Florida.	LVD.	purpose of changing its registere	ed office or registered agent, or both,	
101 EAŚT I 2700 BARN ΓΑΜΡΑ, FL Γhe above	KENNEDY BI NETT PLAZA . 33601 US named entity of Florida. RE:	LVD. submits this statement for the			
IO1 EAST I 2700 BARN FAMPA, FL The above In the State BIGNATUR	KENNEDY BI NETT PLAZA . 33601 US named entity of Florida. RE: Electro	submits this statement for the nic Signature of Registered Ag	ent	Date	
IO1 EAST I 2700 BARN FAMPA, FL The above In the State BIGNATUR	KENNEDY BI NETT PLAZA . 33601 US named entity of Florida. RE: 	submits this statement for the nic Signature of Registered Ag	ent		
IO1 EAST I 2700 BARN FAMPA, FL The above In the State BIGNATUR	KENNEDY BINETT PLAZA 33601 US named entity of Florida. RE: Electro npaign Financir 6 AND DIRECTO LACERTE, GR	submits this statement for the nic Signature of Registered Ag g Trust Fund Contribution (). CTORS:) Delete ANT, SET GARDENS RD.	ent	Date	

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: KAREN LACERTE PRES 01/31/2007