

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006 8:00 am
Secretary of State

04-19-2006 90082 018 ***150.00

DOCUMENT # 629373

1. Entity Name
LARRY E. STAUFFER, P.A.



Principal Place of Business
**6638 NEWPORT LAKE CIRCLE
BOCA RATON, FL 33496 US**

Mailing Address
**6638 NEWPORT LAKE CIRCLE
BOCA RATON, FL 33496 US**

40053259



2. Principal Place of Business

3169 SW RIVERS END WAY
Suite, Apt. #, etc.

3. Mailing Address

3169 SW RIVERS END WAY
Suite, Apt. #, etc.

04042006 Chg-P CR2E034 (11/05)

City & State

Palm City, FL

Zip
34990

Country
Martin

City & State

Palm City, FL

Zip
34990

Country
Martin

4. FEI Number
59-1920742

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**STAUFFER, LARRY E.
6638 NEWPORT LAKE CIRCLE
BOCA RATON, FL 33496**

Name

LARRY STAUFFER

Street Address (P.O. Box Number is Not Acceptable)

3169 S.W. RIVERS END WAY

PALM CITY, FL. 34990

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
STAUFFER, LARRY E
6638 NEWPORT LAKE CIRCLE
BOCA RATON, FL 33496** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**STD
STAUFFER, KATHLEEN
6638 NEWPORT LAKE CIRCLE
BOCA RATON, FL 33492** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☒ Change ☐ Addition
**LARRY STAUFFER
3169 S.W. RIVERS END WAY
PALM CITY, FL. 34990**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☒ Change ☐ Addition
**KATHLEEN STAUFFER
3169 SW RIVERS END WAY
PALM CITY, FL 34990**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/4/06

722-219-1005