

**2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Apr 28, 2006  
Secretary of State**

DOCUMENT# 662969

Entity Name: LEMUEL RAMOS AND ASSOCIATES, INC.

**Current Principal Place of Business:**

10748 DEERWOOD PARK BLVD. SOUTH  
STE 300  
JACKSONVILLE, FL 32256 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4850  
JACKSONVILLE, FL 322014850 US

**New Mailing Address:**

FEI Number: 59-2008550      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

JACOBSON, KENNETH R  
10748 DEERWOOD PARK BLVD. SOUTH  
JACKSONVILLE, FL 32256 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PSTC ( ) Delete  
Name: ROBERTSON, DAVID K  
Address: 10748 DEERWOOD PARK BLVD. SOUTH  
City-St-Zip: JACKSONVILLE, FL 32256

Title: VD ( ) Delete  
Name: BARNES, DALE A  
Address: 300 S. PINE ISLAND RD-STE 300  
City-St-Zip: PLANTATION, FL 333240000

Title: D ( ) Delete  
Name: JENKINS, LEERIE T  
Address: 10748 DEERWOOD PARK BLVD. SOUTH  
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP ( ) Delete  
Name: JACOBSON, KENNETH R  
Address: 10748 DEERWOOD PARK BLVD. SOUTH  
City-St-Zip: JACKSONVILLE, FL 32256

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: BARNES, DALE A  
Address: 3760 MAGUIRE BLVD., STE. 300  
City-St-Zip: ORLANDO, FL 32803

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: KENNETH R. JACOBSON

VP

04/28/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date