

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2007 8:00 am
Secretary of State

04-17-2007 90234 028 ***150.00

DOCUMENT # F06000005008 1. Entity Name MOSER MAYER PHOENIX ASSOCIATES, P.A.																																																																																															
Principal Place of Business 328 E. MARKET STREET STE 200 GREENSBORO NC 27401				Mailing Address 328 E. MARKET STREET STE 200 GREENSBORO NC 27401																																																																																											
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																																																																																													
City & State		City & State																																																																																													
Zip	Country	Zip	Country	4. FEI Number 56-1524577																																																																																											
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable																																																																																											
5. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 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)																																																																																															
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																																																																												
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%; text-align: right;">Delete ☐</td> </tr> <tr> <td>STREET ADDRESS</td> <td>MOSER, WILLIAM D JR</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>328 E. MARKET STREET STE 200 GREENSBORO NC 27401</td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">Delete ☐</td> </tr> <tr> <td>STREET ADDRESS</td> <td>DS MAYER, KENNETH C</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>328 E. MARKET STREET STE 200 GREENSBORO NC 27401</td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">Delete ☐</td> </tr> <tr> <td>STREET ADDRESS</td> <td>D PHOENIX, THOMAS H</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>328 E. MARKET STREET STE 200 GREENSBORO NC 27401</td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">Delete ☐</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">Delete ☐</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">Delete ☐</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%; text-align: right;">Change ☐ Addition ☐</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">Change ☐ Addition ☐</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">Change ☐ Addition ☐</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">Change ☐ Addition ☐</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>						TITLE	NAME	Delete ☐	STREET ADDRESS	MOSER, WILLIAM D JR		CITY - ST - ZIP	328 E. MARKET STREET STE 200 GREENSBORO NC 27401		TITLE	NAME	Delete ☐	STREET ADDRESS	DS MAYER, KENNETH C		CITY - ST - ZIP	328 E. MARKET STREET STE 200 GREENSBORO NC 27401		TITLE	NAME	Delete ☐	STREET ADDRESS	D PHOENIX, THOMAS H		CITY - ST - ZIP	328 E. MARKET STREET STE 200 GREENSBORO NC 27401		TITLE	NAME	Delete ☐	STREET ADDRESS			CITY - ST - ZIP			TITLE	NAME	Delete ☐	STREET ADDRESS			CITY - ST - ZIP			TITLE	NAME	Delete ☐	STREET ADDRESS			CITY - ST - ZIP			TITLE	NAME	Change ☐ Addition ☐	STREET ADDRESS			CITY - ST - ZIP			TITLE	NAME	Change ☐ Addition ☐	STREET ADDRESS			CITY - ST - ZIP			TITLE	NAME	Change ☐ Addition ☐	STREET ADDRESS			CITY - ST - ZIP			TITLE	NAME	Change ☐ Addition ☐	STREET ADDRESS			CITY - ST - ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <u>Thomas H. Phoenix</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR THOMAS H. PHOENIX																																																																																															
4-4-07 336-373-9800 Date Daytime Phone #																																																																																															