

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13563

FILED  
Jan 10, 2006  
Secretary of State

Entity Name: ROBERTS, TERRY & DURKEE, P.A.

## Current Principal Place of Business:

2900 SW 28TH TERR., 7TH FLOOR  
MIAMI, FL 33133

## New Principal Place of Business:

121 ALHAMBRA PLAZA  
SUITE 1603  
CORAL GABLES, FL 33134

## Current Mailing Address:

2900 SW 28TH TERR., 7TH FLOOR  
MIAMI, FL 33133

## New Mailing Address:

121 ALHAMBRA PLAZA  
SUITE 1603  
CORAL GABLES, FL 33134

FEI Number: 59-2054202

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBERTS, CLAY  
2900 SW 28TH TERRACE  
MIAMI, FL 33133 US

## Name and Address of New Registered Agent:

ROBERTS, CLAY  
121 ALHAMBRA PLAZA  
SUITE 1603  
CORAL GABLES, FL 33134 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:

01/10/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: ROBERTS, CLAY  
Address: 2900 SW 28TH TERRACE 7TH FLOOR  
City-St-Zip: MIAMI, FL 33133

Title: VD ( ) Delete  
Name: TERRY, WILLIAM K  
Address: 2900 SW 28TH TERR, 7TH FL  
City-St-Zip: MIAMI, FL 33133

Title: TD (X) Delete  
Name: DURKEE, C. DAVID  
Address: 2900 SW 28TH TERRACE 7TH FLOOR  
City-St-Zip: MIAMI, FL 33133

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: ROBERTS, CLAY  
Address: 121 ALHAMBRA PLAZA, SUITE 1603  
City-St-Zip: CORAL GABLES, FL 33134

Title: TD (X) Change ( ) Addition  
Name: DURKEE, C. DAVID  
Address: 121 ALHAMBRA PLAZA, SUITE 1603  
City-St-Zip: CORAL GABLES, FL 33134

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: H. CLAY ROBERTS

P

01/10/2006

Electronic Signature of Signing Officer or Director

Date