
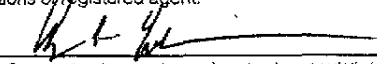
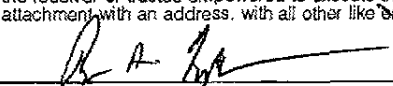


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 02, 2007 08:00 AM  
Secretary of State

<b>DOCUMENT # F60135</b> 1. Entity Name <b>SID HIGGINBOTHAM, &amp; ASSOCIATES, INC.</b>					
Principal Place of Business <b>% ROBINSON FRAZIER 8518 103RD STREET JACKSONVILLE FL 32210</b>			Mailing Address <b>% ROBINSON FRAZIER 8518 103RD STREET JACKSONVILLE FL 32210</b>		
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		Country		4. FEI Number <b>59-2145152</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent <b>FRAZIER, W. ROBINSON 1515 RIVERSIDE AVENUE, SUITE #A JACKSONVILLE FL 32204</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				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 				ROGER A. HIGGINBOTHAM, VPRES. 1/30/07	
Signature, typed or printed name of registered agent and title if applicable				(NOTE: Registered Agent signature required when reinstating) DATE	
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY- ST- ZIP VP HIGGINBOTHAM, ROGER A 8518 103RD STREET JACKSONVILLE, FL 00000				TITLE NAME STREET ADDRESS CITY- ST- ZIP H000000618693 02/08/07-80040-004 150.00	
TITLE NAME STREET ADDRESS CITY- ST- ZIP P HIGGINBOTHAM, SIDNEY H 8518 103RD STREET JACKSONVILLE, FL 00000				TITLE NAME STREET ADDRESS CITY- ST- ZIP Change Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP Delete				TITLE NAME STREET ADDRESS CITY- ST- ZIP Change Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP Delete				TITLE NAME STREET ADDRESS CITY- ST- ZIP Change Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP Delete				TITLE NAME STREET ADDRESS CITY- ST- ZIP Change Addition	
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TITLE NAME STREET ADDRESS CITY- ST- ZIP Delete				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 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: 				ROGER A. HIGGINBOTHAM V.P. 1/30/07	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Daytime Phone #	