2006 FOR PROFIT CORPORATION 🏻 AÑNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Jun 20, 2006 08 Secretary of

DOCUMENT # F76482

1. Entity Name

BARBARA BALL & ASSOCIATES, INC.



Principal Place of Business

C/O WIELAND, JEFFREY, P

255 SOUTH ORANGE AVE., STE 1700 ORLANDO, FL 32801-3483 US

Mailing Address

10 DALEGARTH AVE BOLTON, BL1-5-W, ENGLAND UNITED KINGDOM, BL1-5-W



06132006

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2190700

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TURE AND TYPED OR PROVIDED

WIELAND, JEFFREY P 255 SOUTH ORANGE AVE STE 1700 ORLANDO, FL 32801

SIGNATURE:

DO NOT WRITE IN THIS SPACE

]		•	
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, Apped or printed name of registeried agent and title if applicable (NOTE: Registure Required when reinstating) 05/20/05-60004(TE) 151, 00					
FILE NOWIII FEE IS \$150.00 9. Election Campaign Finance Trust Fund Contribution.			ing	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CANNON, JAMES M 499 SR 434 STE 2015 ALTAMONTE SPGS, FL		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-SI-ZIP	PTD BALL, GRAHAM FAIRHOLME DALGARTH AVE BOLTON, U K 00000,				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BALL, NIGEL S FAIRHOLME DALGARTH AVE BOLTON, U K 00000,				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SANJURJO, RALPH E 4041 ROSE PETAL LANE ORLANDO, FL 00000,				
TITLE NAME STREET ADDRESS CITY-SI-ZIP	VSD BALL, BARBARA FAIRHOLME DALGARTH AVE ORLANDO, FL 00000,				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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.					

ResideN, GRAHAM BALL