2007 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 10, 2007 08:00 AM Secretary of State DOCUMENT #F93324 1. Entity Name ELLIS R. FAUGHT, JR., P.A. Mailing Address Principal Place of Business 206 MASON ST 206 MASON ST BRANDON, FL 33511 BRANDON, FL 33511 01052007 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2211221 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FAUGHT, ELLIS R JR DO NOT WRITE 206 MASON ST BRANDON, FL 33511 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, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS PD TITLE FAUGHT, ELLIS R JR NAME STREET ADDRESS 7049 REMINGTON RD. BROOKSVILLE, FL CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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12. I nereby 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.

STREET ADDRESS

SIGNATURE: SIGNATURE AND TYPED OR PRINTEDMANE OF SIGNING OFFICER OR DIRECTOR Date Date Date Day Into Phone 1