2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000005357

WETZEL, MELISSA W

PENSACOLA, FL 32501

220 WEST GARDEN STREET, SUITE 802

Name:

Address:

City-St-Zip:

Entity Name: BOND & BOTES PENSACOLA P.C.

FILED Mar 10, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 555 EAST GOVERNMENT STREET PENSACOLA, FL 32502 **Current Mailing Address: New Mailing Address:** 555 EAST GOVERNMENT STREET 2236 CAHABA VALLEY DRIVE SUITE 210 PENSACOLA, FL 32502 BIRMINGHAM, AL 35242 FEI Number: 59-3341329 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BOTES, BRADFORD W MR BOTES, BRADFORD W MR. 555 EAST GOVERNMENT STREET 2236 CAHABA VALLEY DRIVE PENSACOLA, FL 32502 SUITE 210 BIRMINGHAM, FL 35242 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: 03/10/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition BOTES, BRADFORD W Name: Name: BOTES, BRADFORD W 4017 KINROSS LANE 2236 CAHABA VALLEY DRIVE, SUITE 210 Address: Address: City-St-Zip: BIRMINGHAM, AL 35242 City-St-Zip: BIRMINGHAM, AL 35242 Title: VΡ Title: () Delete () Change () Addition Name: BOND, MARK W Name: 600 UNIVERSITY PARK PLACE, SUITE 310 Address: Address: BIRMINGHAM, AL 352096778 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition SYKSTUS, RONALD C Name: Name: 415 CHURCH STREET, SUITE 100 Address: Address: City-St-Zip: HUNTSVILLE, AL 35801 City-St-Zip: Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: BRADFORD W. BOTES PRES 03/10/2006