


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2007 8:00 am
Secretary of State

02-01-2007 90029 009 ***150.00

DOCUMENT # F97640 1. Entity Name MERLE F. HENRY, C.P.A., P.A.	
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Principal Place of Business 6258 PRESIDENTIAL CT., SW STE 104 FORT MYERS, FL 33919	Mailing Address 6258 PRESIDENTIAL CT., SW STE 104 FORT MYERS, FL 33919
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2. Principal Place of Business - No P.O. Box # 6213 Presidential Court Suite, Apt. #, etc. Suite B City & State Fort Myers, Florida	3. Mailing Address 6213 Presidential Court Suite, Apt. #, etc. Suite B City & State Fort Myers, Florida
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Zip 33919	Country USA	Zip 33919	Country USA
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40008168



01302007 Chg-P CR2E034 (12/06)

4. FEI Number 59-2222613	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HENRY, MERLE F. 6258 PRESIDENTIAL CT. SW FORT MYERS, FL 33919	7. Name and Address of New Registered Agent Name Merle F. Henry Street Address (P.O. Box Number is Not Acceptable) 6213 Presidential Court Suite B City Fort Myers FL Zip Code 33919
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST HENRY, MERLE F., C.P.A. 6258 PRESIDENTIAL CT. SW FORT MYERS, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 6213 Presidential Court, Suite B
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HENRY, MERLE F., C.P.A. 6258 PRESIDENTIAL CT. SW FORT MYERS, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 6213 Presidential Court, Suite B
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: Merle F. Henry MERLE F. HENRY JAN 30 2007 (239)481-5100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #