

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 04, 2007 8:00 am**  
**Secretary of State**

05-04-2007 90086 003 \*\*\*150.00

<b>DOCUMENT # F99000000484</b>					
<b>1. Entity Name</b> DAVIDSON, GOLDEN & LUNDY, P.C. dba Davidson, Golden, Lundy & Forehand, P.C.					
<b>Principal Place of Business</b> SIX CADILLAC DRIVE, SUITE 410 BRENTWOOD, TN 37027			<b>Mailing Address</b> SIX CADILLAC DRIVE, SUITE 410 BRENTWOOD, TN 37027		
<b>2. Principal Place of Business - No P.O. Box #</b> 7698 Municipal Drive		<b>3. Mailing Address</b> Suite, Apt. #, etc.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
<b>City &amp; State</b> Orlando FL		<b>City &amp; State</b>		<b>4. FEI Number</b> 62-1397304	
<b>Zip</b> 32819		<b>Country</b> USA		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b> PLATZER, WILLIAM N 600 N. PINE ISLAND RD., STE. 165 PLANTATION, FL 33324			<b>7. Name and Address of New Registered Agent</b> Name: <b>Whitley B. Forehand</b> Street Address (P.O. Box Number is Not Acceptable): <b>7698 Municipal Drive</b> City: <b>Orlando</b> FL Zip Code: <b>32819</b>		
<b>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.</b> SIGNATURE: <u>Whitley B. Forehand, Vice President</u> <span style="float: right;">4/30/2007</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required to reinstate.) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> PC <b>NAME</b> DAVIDSON, ROBERT A <b>STREET ADDRESS</b> SIX CADILLAC DRIVE, SUITE 410 <b>CITY - ST - ZIP</b> BRENTWOOD, TN 37027	<input type="checkbox"/> Delete		<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY - ST - ZIP</b> 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> DV <b>NAME</b> GOLDEN, GREGORY W <b>STREET ADDRESS</b> SIX CADILLAC DRIVE, SUITE 410 <b>CITY - ST - ZIP</b> BRENTWOOD, TN 37027	<input type="checkbox"/> Delete		<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY - ST - ZIP</b> 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> VT <b>NAME</b> LUNDY, JAMES C JR <b>STREET ADDRESS</b> SIX CADILLAC DR STE 410 <b>CITY - ST - ZIP</b> BRENTWOOD, TN 37027	<input type="checkbox"/> Delete		<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY - ST - ZIP</b> 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> V <b>NAME</b> VELLA, DANIEL J <b>STREET ADDRESS</b> SIX CADILLAC DR STE 410 <b>CITY - ST - ZIP</b> BRENTWOOD, TN 37027	<input type="checkbox"/> Delete		<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY - ST - ZIP</b> 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> V <b>NAME</b> FOREHAND, WHITLEY B <b>STREET ADDRESS</b> SIX CADILLAC DR STE 410 <b>CITY - ST - ZIP</b> BRENTWOOD, TN 37027	<input type="checkbox"/> Delete		<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b> 7698 Municipal Drive <b>CITY - ST - ZIP</b> Orlando, FL 32819	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> V <b>NAME</b> ALFORD, GREGORY <b>STREET ADDRESS</b> SIX CADILLAC DRIVE, SUITE 410 <b>CITY - ST - ZIP</b> BRENTWOOD, TN 37027	<input type="checkbox"/> Delete		<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY - ST - ZIP</b> 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>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.</b>					
<b>SIGNATURE:</b> <u>Whitley B. Forehand</u>			Date: <u>4/30/2007</u> 407-351-8120		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

Davidson, Golden Lundy, P.C.

#10 - Officers and Directors (cont.)

Name	Title	Address
Thomas Bryan Hinton, CPA	Vice-Pres.	6 Cadillac Drive, Suite 410 Brentwood, TN 37027
Stephanie Hurt, CPA	Vice-Pres.	6 Cadillac Drive, Suite 410 Brentwood, TN 37027
Bill Clark, CPA	Vice-Pres.	6 Cadillac Drive, Suite 410 Brentwood, TN 37027

ATTACHMENT

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