## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Feb 05, 2007 8:00 am Secretary of State **DOCUMENT # G49037** 02-05-2007 90119 006 \*\*\*150.00 GERALD R. PUMPHREY, PROFESSIONAL ASSOCIATION Principal Place of Business Mailing Address 11000 PROSPERITY FARMS RD #300 11000 PROSPERITY FARMS RD #300 TICATUUD PALM BCH GDNS, FL 33410 PALM BCH GDNS, FL 33410 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 4495 Military Trail Same Suite, Apt. #, etc. Suite, Apt. #, etc. 01292007 CR2E034 (12/06) Chg-P #201 City & State City & State 4. FEI Number Applied For 59-2328854 Not Applicable <u>Jupiter, FI</u> \$8.75 Additional 5. Certificate of Status Desired 33458 Palm Bch Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Gerald R. Pumphrey Street Address (P.O. Box Number is Not Acceptable) 4495 Military Trail -PUMPHREY, GERALD R. 11000 PROSPERITY FARMS RD #300 #201 PALM BCH GDNS, FL 33410 Jupiter, FL 33458 Zip Code 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 registred agent. Esasa mohre registered agent and like if applicat (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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. DP X Change TITLE ☐ Delete TITLE ■ Addition PUMPHREY, GERALD R NAME NAME Gerald R. Pumphrey 17909 PROBPERATY FY13 300 STREET ADDRESS STREET ADDRESS. 4495 Military Trail - #201 PALM BCH GDNS, FL CITY-ST-ZIP CITY-ST-ZIP Jupiter, FL 33458 ☐ Delete TITLE TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE Change TITLE Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPE

CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING PRICER OF DIRECTOR

1/30/07 (561) 622 Date Dayung Phon

FILED