2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 09, 2008 08:00 A Secretary of State

DOCUMENT # H89534 1. Entity Name HALL AND ANDERSON, P.A.			Secretary of St			
1314 EAST	Principal Place of Business 1314 EAST VENICE AVENUE, SUITE E VENICE, FL 34285 US Mailing Address 1314 EAST VENICE AVENUE SUITE E VENICE, FL 34285					
DO NOT WRITE IN THIS SPA			CE	01032008 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For S9-2609502 Not Applied be Status Desired \$8.75 Additional Fee Required		
HALL, WA			no	NOT W	RITE	
1314 EAST VENICE AVE SUITE E VENICE, FL 34285			IN THIS SPACE			
8. The above the obligat	e named entity submits this statement for the litins of registered agent. Signafure, hybed or pyfred name of registered agest and	el .	d Agent signal bre required		th, in the State of Flor	rida. I am familiar with, and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution				.00 May Be led to Fees		
10. IIIE NAME STREEI ADDRESS CITY-ST-ZIP TILLE NAME STREEI ADDRESS	OFFICERS AND DI DP HALL, WAYNE C 1314 EAST VENICE AVENUE SUI VENICE, FL 34285 DVS ANDERSON, ROBERT C. 2120 MUSKOGEE TRAIL			U000007 01/09/08-8	76016 0008-004 150.00	
CITY ST-7IP NOKOMIS, FL THE					NOT WI	

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statures. I further contify 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 charged, or on an attachment output an address, with all gareylike empowered.

SIGNATURE:

NAME SIREE! ADDRESS CITY-ST-ZIP

NAME STRELT ADDRESS C'LY ST-ZIP

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-4-08

941-420-0990

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