

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J49321

Entity Name: JOHN C. ANDY, C.P.A., P.A.

FILED
Jan 28, 2007
Secretary of State

Current Principal Place of Business:

C/O JOHN C. ANDY
1103 W HIBISCUS BLVD STE 311
MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

2727 N HWY A1A
603
INDIALANTIC, FL 32903

New Mailing Address:

FEI Number: 59-2743540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDY, JOHN C.
1103 W. HIBISCUS BLVD.
SUITE 311
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ANDY, JOHN C.,
Address: 1103 W. HIBISCUS BLVD. 3 11
City-St-Zip: MELBOURNE, FL 32901

Title: VS () Delete
Name: HAGA, SHARON M.,
Address: 7673 CANDLEWICK DRIVE
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VS (X) Change () Addition
Name: HAGA, SHARON M.,
Address: 7673 CANDLEWICK DRIVE
City-St-Zip: MELBOURNE, FL 32940

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.

SIGNATURE: JOHN. C. ANDY

DP

01/28/2007

Electronic Signature of Signing Officer or Director

Date