2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2007 08:00 AM
Secretary of State

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1. Entity Name

FOSTER & MARSHALL ACCOUNTANTS, INC.



Principal Place of Business

Mailing Address

4355 HANCOCK BRIDGE PARKWAY NORTH FORT MYERS, FL 33903 4355 HANCOCK BRIDGE PARKWAY NORTH FORT MYERS, FL 33903



CR2E034 (11/05)

Fee Required

DO NOT WRITE IN THIS SPACE

| 4. FEI Number | Applied For |
|-------------------------------|-------------------|
| 59-2730110 | Not Applicable |
| Certificate of Status Desired | \$8.75 Additional |

6. Name and Address of Current Registered Agent

MARSHALL, RICHARD A. 3891 HIDDEN ACRES CIRCLE NORTH FORT MYERS, FL 32903

DO NOT WRITE IN THIS SPACE

No Chg-P

04172007

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|---------------------------------------|---|--|-------------------|--------------------------------|---|
| | e named entity submits this statement for the plans of registered agent. | ourpose of changing its registere | ed office or r | egistered agent, or both, | in the State of Florida. I am familiar with, and accept |
| SIGNATURE. | Signature, typed or printed name of registered agent and title | if applicable (NOTE Registered | i Ageni signature | a required when reinstating) | DATE |
| | E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00 | Election Campaign Finan Trust Fund Contribution. | cing | \$5.00 May Be Added to Fees | |
| 10. | OFFICERS AND DIREC | CTORS | I | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DTP MARSHALL, RICHARD A. 3891 HIDDEN ACRES CIRCLE NORTH FORT MYERS, FL 33903 | | | | U00000720016 05/01/07-80087-012 150.00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| TITLE NAME STREET ADDRESS | | | | חחו | NOT WRITE |

IN THIS SPACE

12. Thereby certify that the information supplied with this filling 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 alterarment with an address, with all other like empowered.

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SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DI

RICHARD MORSholl

4-17-07

. 239-997-144/

Dayline