

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J67181

FILED  
Mar 12, 2007  
Secretary of State

Entity Name: SUCCESSFUL MONEY MANAGEMENT, INC.

**Current Principal Place of Business:**

119 S. PALMETTO AVENUE  
SUITE 100  
DAYTONA BEACH, FL 32114

**New Principal Place of Business:**

**Current Mailing Address:**

1633 FLORIDA STREET  
DAYTONA BEACH, FL 32114

**New Mailing Address:**

FEI Number: 59-2797318      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILLIAMS, ODOLL VAN JR.  
1633 FLORIDA STREET  
DAYTONA BEACH, FL 32114      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: P      ( ) Delete  
Name: WILLIAMS, ODOLL V., JR  
Address: 1633 FLORIDA STREET  
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: S      ( ) Delete  
Name: WILLIAMS, SHIRLEY A  
Address: 1633 FLORIDA STREET  
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: VP      ( ) Delete  
Name: ROBINSON, IRA J JR  
Address: 119 S. PALMETTO AVENUE, SUITE 100  
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: T      ( ) Delete  
Name: ROBINSON, KAY F  
Address: 119 S. PALMETTO AVENUE, SUITE 100  
City-St-Zip: DAYTONA BEACH, FL 32114 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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: SHIRLEY WILLIAMS

S

03/12/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date