2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # K09749

1. Entity Name
SILENT PARTNER, INC.

Principal Place of Business	Mailing Address
1413 S.W. 10TH STREET	1413 S.W. 10TH STREET
FT. LAUDERDALE, FL 33312	FT. LAUDERDALE, FL 33312

DO NOT WRITE IN THIS SPACE

01312007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-0030212	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WHITE, ROBERT A.
1401 UNIVERSITY DR, STE 600
CORAL SPRINGS, FL 33065

DO NOT WRITE
IN THIS SPACE

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 registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE. Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2007 Fee will be $550.00**	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	U00000622443 02/13/07-80026-013 150.00

10.	OFFICERS AND DIRECTORS		
TITLE	DP		
NAME	LEININGER, RONALD B.		
STREET ADDRESS	1413 S.W. 10TH STREET		
CITY-ST-ZIP	FT. LAUDERDALE, FL		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

DO NOT WRITE
IN THIS SPACE

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.

SIGNATURE: *Ronald B. Leininger*   1-31-07   954 309 3921

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

RONALD B. LEININGER, PRESIDENT