2006 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 11, 2006 08:00 AM Secretary of State **DOCUMENT # K09963** 1. Entity Name DANIEL J. WEBSTER, P.A. Principal Place of Business Mailing Address 149 S RIDGEWOOD AVE 149 S RIDGEWOOD AVE SUITE 500 SUITE 500 DAYTONA BEACH, FL 32114 DAYTONA BEACH, FL 32114 CR2E034 (11/05) 01042006 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2867148 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WEBSTER, DANIEL J DO NOT WRITE 149 S RIDGEWOOD AVE SUITE 500 IN THIS SPACE DAYTONA BEACH, FL 32114 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. -0.101 150 .001 SIGNATURE. Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE \mathbf{D} WEBSTER, DANIEL J NAME STREET ADDRESS 149 \$ RIDGEWOOD AVE SUITE 500 CITY-ST-ZIP DAYTONA BEACH, FL 32114 TITLE NAME STREET ADDRESS CITY-ST-ZIP TIDLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes 1 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

SIGNATURE:

STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS CITY -ST-ZIP

Daniel J. Webster

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-4-06

386-258-1222

Daytime Phone #

FILED