

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K88002

FILED  
Jan 17, 2007  
Secretary of State

Entity Name: E.Z. BAIL BONDS CORPORATION

**Current Principal Place of Business:**

1822 BROADWAY  
FT MYERS, FL 33901 US

**New Principal Place of Business:**

**Current Mailing Address:**

1822 BROADWAY  
FT MYERS, FL 33901 US

**New Mailing Address:**

FEI Number: 65-0118894

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PERKINS, ZYZLA W  
1822 BROADWAY  
SUITE 200  
FT MYERS, FL 33901 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: DPS ( ) Delete  
Name: PERKINS, EARL G.,  
Address: 1822 BROADWAY STE B  
City-St-Zip: FORT MYERS, FL 33901

Title: DVT ( ) Delete  
Name: PERKINS, ZYZLA W.,  
Address: 1822 BROADWAY STE B  
City-St-Zip: FORT MYERS, FL 33901

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

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: ZYZLA W. PERKINS

DVT

01/17/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date