2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED DOCUMENT # L02404 Feb 05, 2007 08:00 AM Secretary of State 1. Entity Namo CURTIS L. LAW, INC. Principal Place of Business Mailing Address % E. JACKSON BOGGS 3812 PERDEW RD % E. JACKSON BOGGS 3812 PERDEW RD LAND O' LAKES FL 34639 LAND O' LAKES FL 34639 2. Principal Placo of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) Applied For City & State City & State 4. FEI Number 59-2992450 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Dosired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BOGGS, E. JACKSON Street Address (P.O. Box Number is Not Acceptable) 501 E KENNEDY BLVD **SUITE 1700** TAMPA FL 33602 City Zip Code 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 their applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Addition DHU. ☐ Delete IIII ☐ Change LAW, CURTIS L. U00000622634 02/13/07-80034-010 150.00 NAMI NAMI 3812 PERDEW DR STRULT ADDRESS STREET ADDRESS LAND QUAKERE HIV-SI-71 CUV_S1-71P ☐ Change 11111 ☐ Defete Addition HHI LAW, MAXINE M. NAME NAME 3812 PERDEW DR STREET ADORESS STREET ADDRESS LAND O LAKES FL CITY ST-ZIP CHY-ST-ZIP HH ☐ Delete Change Addition LAW, CURTIS L., JR. NAMI. NAME STREET ADDRESS 3812 PERDEW DR STREET ADDRESS CITY-ST-ZIP LAND O LAKES FL CHY-SI-7P HILL Delete Change ☐ Addition DARANT, SHELLIE ANN 3812 PERDEW DR STREET ADDRESS STREET ADORESS LAND O LAKES FL CHY-SL-7/P CHY-S1-7/P Delete шп Change Addition NAMI NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-SI-7IP Addition BILE Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-719 CITY-ST-70P

12. I horeby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 logal effect as if made under eath; 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: