

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L19042

FILED
Jul 06, 2006
Secretary of State

Entity Name: RYWANT, ALVAREZ, JONES, RUSSO & GUYTON, P.A.

Current Principal Place of Business:

C/O GREGORY D. JONES
109 N. BRUSH STREET, SUITE 500
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

C/O GREGORY D. JONES
109 N. BRUSH STREET, SUITE 500
TAMPA, FL 33602

New Mailing Address:

FEI Number: 59-2966667

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, GREGORY D.
109 N. BRUSH STREET
SUITE 500
TAMPA, FL 33602 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: D () Delete
Name: RYWANT, MICHAEL S.,
Address: 109 N. BRUSH ST. S-500
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: ALVAREZ, MANUEL J.,
Address: 109 N. BRUSH ST. S-500
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: JONES, GREGORY D.,
Address: 109 N. BRUSH ST. S-500
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: RUSSO, ANDREW F.,
Address: 109 N. BRUSH ST. S-500
City-St-Zip: TAMPA, FL

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: GREGORY D JONES

O/D

07/06/2006

Electronic Signature of Signing Officer or Director

_____ Date