2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L23601

Jun 26, 2007 Secretary of State

FILED

Entity Name: SAALFIELD, SHAD, JAY LUCAS & STOKES, P.A.

Current Principal Place of Business: New Principal Place of Business: 50 NORTH LAURA STREET **SUITE 2950** JACKSONVILLE, FL 32202 **New Mailing Address: Current Mailing Address:** P.O. BOX 41589 JACKSONVILLE, FL 322031589 US FEI Number: 59-2972592 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STOKES, JOSEPH B STOKES, JOSEPH B P.O. BOX 41589 4651 ARÁPAHOE AVE JACKSONVILLE, FL 322031589 US JACKSONVILLE, FL 32210 US 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: 06/26/2007 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition SAALFIELD, JOHN R Name: Name: 8732 ROLLING BROOK LN Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: Title: DIR Title: () Delete () Change () Addition Name: SHAD, CHARLES T Name: 1251 E COAST DR Address: Address: ATLANTIC BEACH, FL 32233 City-St-Zip: City-St-Zip: () Delete Title: Title: DIR () Change () Addition JAY, HARVEY L III Name: Name: 8221 HUNTERS GROVE RD Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: Title: DIR (X) Delete Title: () Change () Addition LUCAS, BRETT Q Name: Name: Address: 3907 GADSDEN RD Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: Title: Title: () Delete () Change () Addition STOKES, JOSEPH B III Name: Name: 4651 ARAPAHOE AVE Address: Address: City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JOHN R. SAALFIELD DIR 06/26/2007