

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L41798

FILED
Jun 04, 2007
Secretary of State

Entity Name: JAMES KARL & ASSOCIATES, P.A.

Current Principal Place of Business:

971 NORTH COLLIER BLVD
MARCO ISLAND, FL 34145 US

New Principal Place of Business:

678 BALD EAGLE DRIVE
MARCO ISLAND, FL 34145 US

Current Mailing Address:

971 NORTH COLLIER BLVD
MARCO ISLAND, FL 34145 US

New Mailing Address:

678 BALD EAGLE DRIVE
MARCO ISLAND, FL 34145 US

FEI Number: 65-0173696

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KARL, JAMES L II
971 NORTH COLLIER BLVD
MARCO ISLAND, FL 34145 US

Name and Address of New Registered Agent:

KARL, JAMES L II
678 BALD EAGLE DRIVE
MARCO ISLAND, FL 34145 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:

06/04/2007

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:

Title: P () Delete
Name: KARL, JAMES L II
Address: 971 NORTH COLLIER BLVD
City-St-Zip: MARCO ISLAND, FL 34145

Title: VP () Delete
Name: MARETTA, ROBIN
Address: 971 NORTH COLLIER BLVD
City-St-Zip: MARCO ISLAND, FL 34145

Title: T () Delete
Name: SHIGLEY, SCOTT
Address: 971 NORTH COLLIER BLVD
City-St-Zip: MARCO ISLAND, FL

Title: S (X) Delete
Name: HOCK, ROBERT
Address: 971 NORTH COLLIER BLVD
City-St-Zip: MARCO ISLAND, FL 34145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KARL, JAMES L II
Address: 678 BALD EAGLE DRIVE
City-St-Zip: MARCO ISLAND, FL 34145

Title: VP (X) Change () Addition
Name: MARETTA, ROBIN
Address: 678 BALD EAGLE DRIVE
City-St-Zip: MARCO ISLAND, FL 34145

Title: ST (X) Change () Addition
Name: SHIGLEY, SCOTT
Address: 678 BALD EAGLE DRIVE
City-St-Zip: MARCO ISLAND, FL

Title: () Change () Addition
Name:
Address:
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: JAMES KARL

P

06/04/2007

Electronic Signature of Signing Officer or Director

Date