

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L53155

FILED  
Jan 04, 2007  
Secretary of State

**Entity Name:** BETTY W. KELLY, CERTIFIED PUBLIC ACCOUNTANT, P.A.

**Current Principal Place of Business:**

% BETTY W. KELLY  
843 N WOODLAND BLVD  
DELAND, FL 327202759

**New Principal Place of Business:**

**Current Mailing Address:**

% BETTY W. KELLY  
843 N WOODLAND BLVD  
DELAND, FL 32720

**New Mailing Address:**

**FEI Number:** 59-2986033

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KELLY, BETTY W.  
843 N WOODLAND BLVD  
DELAND, FL 32720 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:** PSTD ( ) Delete  
**Name:** KELLY, BETTY W.,  
**Address:** 807 BAY TREE CIR  
**City-St-Zip:** DELAND, FL 32724 US

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

**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:** BETTY W KELLY

PRES

01/04/2007

Electronic Signature of Signing Officer or Director

Date