


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 17, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L58607</b>	
1. Entity Name <b>G. EDWARD CLEMENT, P.A.</b>	

Principal Place of Business <b>% G. EDWARD CLEMENT 308 E. FIFTH AVE. MOUNT DORA, FL 32757</b>	Mailing Address <b>% G. EDWARD CLEMENT 308 E. FIFTH AVE. MOUNT DORA, FL 32757</b>
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01032006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-2997964</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>CLEMENT, G. EDWARD 308 E. FIFTH AVE. MOUNT DORA, FL 32757</b>
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**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DTS CLEMENT, G. EDWARD 308 E. FIFTH AVE MOUNT DORA, FL</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>PVP CLEMENT, G. EDWARD 308 E. FIFTH AVE MOUNT DORA, FL</b>
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01/19/06-80060-005 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: G. Edward Clement G. Edward Clement 1/4/06 352.383.4186  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #