2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2007
Secretary of State

DOCUMENT# M09460

Entity Name: CROSS, HAYES, LA ROCHE, INC.

Current Principal Place of Business:

% TIMOTHY CROSS
1881 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071

New Principal Place of Business:

% TIMOTHY CROSS
2901 CORAL HILLS DRIVE, SUITE 200
CORAL SPRINGS, FL 33065

Current Mailing Address:

% TIMOTHY CROSS
2901 CORAL HILLS DRIVE, #200
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 59-2480281 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAROCHE, RONALD L.
1881 UNIVERSITY DR, SUITE 114
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

LAROCHE, RONALD L.
2901 CORAL HILLS DRIVE, SUITE 200
CORAL SPRINGS, FL 33065 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: 04/10/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: CROSS, TIMOTHY D.,
Address: 1881 UNIVERSITY DR.
City-St-Zip: CORAL SPRINGS, FL

Title: DVS ( ) Delete
Name: LAROCHE, RONALD L.,
Address: 1881 UNIVERSITY DR.
City-St-Zip: CORAL SPRINGS, FL

Title: DV ( ) Delete
Name: HAYES, JAMES R.,
Address: 1881 UNIVERSITY DR.
City-St-Zip: CORAL SPRINGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: CROSS, TIMOTHY D.,
Address: 2901 CORAL HILLS DRIVE, SUITE 200
City-St-Zip: CORAL SPRINGS, FL 33065

Title: DVS (X) Change ( ) Addition
Name: LAROCHE, RONALD L.,
Address: 2901 CORAL HILLS DRIVE, SUITE 200
City-St-Zip: CORAL SPRINGS, FL 33065

Title: DV (X) Change ( ) Addition
Name: HAYES, JAMES R.,
Address: 2901 CORAL HILLS DRIVE, SUITE 200
City-St-Zip: CORAL SPRINGS, FL 33065

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: TIMOTHY D. CROSS PRES 04/10/2007
Electronic Signature of Signing Officer or Director — Date