2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M86923

Name:

Address: City-St-Zip: EDWARDS, JR., MABRY - C.F.O.

414 OLD HARD ROAD, SUITE 201

ORANGE PARK, FL 32003

FILED Apr 25, 2007 Secretary of State

Entity Nar	ne: RICK WC	OOD & ASSOCIATES, INC			
Current Principal Place of Business:			New Principal Place	of Business:	
SUITE 201	HARD ROAD PARK, FL 320	03 US			
Current M	ailing Addres	s:	New Mailing Addres	New Mailing Address:	
SUITE 201	HARD ROAD PARK, FL 320	03 US			
FEI Number:	59-2897883	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			t: Name and Address	Name and Address of New Registered Agent:	
FORD, ROBERT A. 414 OLD HARD ROAD SUITE 201 ORANGE PARK, FL 32003 US			414 OLD HARD ROA SUITE 201	WOOD, JAMES RICKY 414 OLD HARD ROAD SUITE 201 ORANGE PARK, FL 32003 US	
The above in the State	named entity s e of Florida.	submits this statement for	the purpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE: JAMES RICKY WOOD				04/25/2007	
	Electron	ic Signature of Registered	Agent	Date	
Election Car	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	WOOD, JAMÈS	ROAD, SUITE 201	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	WOOD, SUSAN	ROAD, SUITE 201	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	T ()	Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JAMES RICKY WOOD PRES 04/25/2007