2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2007 8:00 am
Secretary of State
01-11-2007 90055 037 ****61.25

DOCUMENT # N93000002383

1. Entity Name
CPA SOLE PRACTITIONERS, INC.

40001638

Principal Place of Business	Mailing Address
367 OSBORNE DR NE FORT WALTON BEACH, FL 32548 US	367 OSBORNE DR NE FORT WALTON BEACH, FL 32548 US

01062007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
24 HOLLYWOOD BLVD SW	24 HOLLYWOOD BLVD SW
Suite, Apt. #, etc. SUITE 5	Suite, Apt. #, etc. SUITE 5
City & State FORT WALTON BEACH,FL	City & State FORT WALTON BEACH
Zip / Country 32548 USA	Zip / Country 32548 USA

4. FEI Number
59-3183991
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MAGDIC, ANNE E
12 MIRACLE STRIP PKWY
STE 101
FORT WALTON BEACH, FL 32548

7. Name and Address of New Registered Agent

Name
HAROLD G HOCK
Street Address (P.O. Box Number is Not Acceptable)
24 HOLLYWOOD BLVD SW
SUITE 5
City: FORT WALTON BEACH **FL** Zip Code: 32548

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 HAROLD G HOCK Harold G Hock 1/9/2007
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MAGDIC, ANNE E 12 MIRACLE STRIP PKWY,STE 101 FORT WALTON BEACH, FL 32548	☐ Delete	D	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LAMALIE, GARY L 430 BRYN ATHYN RD MARY ESTHER, FL 32569	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P YOUNG, DOUG 151 REGIONS WAY DESTIN, FL 32541	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WELCH, WILLIAM P 31 WALTER MARTIN RD FORT WALTON BEACH, FL 32548	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	T HAROLD G HOCK 24 HOLLYWOOD BLVD SW STE 5 FORT WALTON BEACH FL 32548	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	S FRANK CLAYCOMB 471 SANDMORE DR MARY ESTHER FL 32569	☐ Change ☑ Addition

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 617, 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: Harold G Hock WAS ESTATE 1/9/2007 850-244-0511
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #