2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001380

Entity Name: LAWYERS ACTION, INC.

FILED Feb 08, 2005 Secretary of State

Current P	rincipal Place of	Business:	New Princ	New Principal Place of Business:		
	ENSWARD DR. SSEE, FL 32312	US				
Current Mailing Address:			New Mailing Address:			
	ENSWARD DR. SSEE, FL 32312	US				
FEI Number:	59-3557621 F	El Number Applied For()	FEI Number Not App	icable () Certificate	of Status Desired (X)	
Name and	Address of Curr	ent Registered Agent:	Name and	Name and Address of New Registered Agent:		
HERMAN, RUSSOMANNO 150 W. FLAGLER ST. STE 2101 MIAMI, FL 33130 US			RUSSOMANNO, HERMAN 150 W. FLAGLER ST. STE 2101 MIAMI, FL 33130 US			
	named entity subr e of Florida.	nits this statement for the pu	urpose of changing i	s registered office or regi	stered agent, or both,	
SIGNATURE: HERMAN RUSSOMANNO				02/08/2005		
	Electronic S	ignature of Registered Ager	nt	Da	te	
OFFICERS	S AND DIRECTOR	RS:	ADDITION	S/CHANGES TO OFFIC	ERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () Dele RUSSOMANNO, HE 150 W. FLAGLER S MIAMI, FL 33130 U	RMAN T. STE 2101	Title: Name: Address: City-St-Zip:	()Change ()A	Addition	
Title: Name: Address: City-St-Zip:	ss: 19 W. FLAGLER ST.		Title: Name: Address: City-St-Zip:	Name: Address:		
Title: Name: Address: City-St-Zip:	ST () Dele RUSSELL, TERREN 200 E BROWARD B FT LAUDERDALE, F	CE LVD	Title: Name: Address: City-St-Zip:	()Change()	Addition	
Title: Name: Address: City-St-Zip:	D () Dele ERVIN, TOM JR. 305 S. GADSDEN S TALLAHASSEE, FL	Т	Title: Name: Address: City-St-Zip:	D (X) Change (). ERVIN, TOM JR. 233 S. GADSDEN ST TALLAHASSEE, FL 32302 U		
Title: Name: Address: City-St-Zip:	D () Dele PARKS, BOB 330 ALHAMBRA CIF CORAL GABLES, FI	CLE, FL 1	Title: Name: Address: City-St-Zip:	()Change ()	Addition	
Title: Name: Address:	D () Dele MILTON, JOE 815 S. MAIN ST., ST		Title: Name: Address:	D (X) Change (). MILTON, JOE 815 S. MAIN ST., STE 200	Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: HERMAN RUSSOMANNO P 02/08/2005

JACKSONVILLE, FL 32301 US

City-St-Zip:

JACKSONVILLE, FL 32207 US