2007 FOR PROFIT CORPORATION

FILED Feb 26, 2007 08:00 A State

ANNUAL REPORT			ren 20, 2007 00	
DOCUMENT # P0000007627 1. Entity Name NANCY CANNING P.A.			Secretary of S	
Principal Place of Business 119 BOCA CIEGA DR. MADEIRA BEACH, FL 33708	Mailing Address 119 BOCA CIEGA DR. MADEIRA BEACH, FL 33708			
DO NOT WRITE IN THIS SPA		CE	02082007 No Chg-P CR2E034 (11/05) 4. FEI Number S9-3624707 Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CANNING, NANCY 119 BOCA CIEGA DR. MADEIRA BEACH, FL 33708			DO NOT WRITE IN THIS SPACE	
8. The above named entity submits this stat the obligations of registered agent. SIGNATURE Signature, typed or printed name of regis FILE NOW!!! FEE IS \$150 After May 1, 2007 Fee will be	ered agent and title if applicable. (NDTE: Register 9. Election Campaign Fina	red Agent signature required	of when reinstating) DATE JOHN May Be ded to Fees	
10. OFFICE ITILE P NAME CANNING, NANCY STREEL ADDRESS CITY-SI-ZIP MADEIRA BEACH, FL 3 TITLE NAME STREEL ADDRESS CITY-SI-ZIP TITLE	RS AND DIRECTORS		U00000648713 03/07/07-80019-019 150.00	
NAME STREET ADDRESS CITY-SI-ZIP TIFLE NAME STREET ADDRESS CITY-SI-ZIP TIPLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS			DO NOT WRITE IN THIS SPACE	
CITY-ST-ZIP TITLE NAME STREET ADDRESS		_	the state of the s	

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:

7 a7-459-9604