

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000035124

FILED  
Apr 19, 2007  
Secretary of State

**Entity Name:** THE LAW OFFICES OF JULIA BEST CHASE, P.A.

**Current Principal Place of Business:**

3202 HENDERSON BLVD.  
SUITE 202  
TAMPA, FL 336093043

**New Principal Place of Business:**

**Current Mailing Address:**

3202 HENDERSON BLVD.  
SUITE 202  
TAMPA, FL 336093043

**New Mailing Address:**

**FEI Number:** 59-3634791

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHASE, JULIA B  
3105 W. AZEELE  
TAMPA, FL 33609 US

**Name and Address of New Registered Agent:**

CHASE, JULIA B  
3202 HENDERSON BLVD.  
SUITE 202  
TAMPA, FL 33609 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:

04/19/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: CHASE, JULIA B  
Address: 3105 W. AZEELE  
City-St-Zip: TAMPA, FL 33609

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: CHASE, JULIA B  
Address: 3202 HENDERSON BLVD. STE 202  
City-St-Zip: TAMPA, FL 33609

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: JULIA BEST CHASE

D

04/19/2007

Electronic Signature of Signing Officer or Director

Date