2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

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Entity Name
RONALD A. DAVID & ASSOCIATES, P.A. ATTORNEY AT LAW

Principal Place of Business
555 SOUTH FEDERAL HWY
SUITE 440
BOCA RATON, FL 33432

Mailing Address
P.O. BOX 2204
BOCA RATON, FL 33427

01162006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1020438 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent

DAVID, RONALD A
555 SOUTH FEDERAL HWY SUITE 440
BOCA RATON, FL 33432

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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: ✓ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ✓ DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

100000397971
01/30/06-80074-016 150.00

OFFICERS AND DIRECTORS

TITLE	P
NAME	DAVID, RONALD A
STREET ADDRESS	555 SOUTH FEDERAL HWY SUITE 440
CITY-ST-ZIP	BOCA RATON, FL 33432
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: ✓ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date ✓ 1-17-06 — Daytime Phone # ✓ (561) 998-93