## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## FILED Feb 27, 2006 8:00 am Secretary of State

DOCUMENT # P00000062555  1. Entity Name PATRICK M. BURNS, CPA, PA						02-27-2006 90	<b>0</b> 0075 002 *	**150.0	)0
Principal Place of Business  1516 E HILLCREST ST, SUITE 307  ORLANDO, FL 32803  Mailing Address  1516 E HILLCREST ST, SUITE 307  ORLANDO, FL 32803  2. Principal Place of Business  3. Mailing Address			SUITE 30	07		019649			
1918 E H. (Vrrst St 1918 E H.) (rrst Suite, Apt. #, etc.				st St	02082006	Chg-P	CR2E034 (	<u> </u>	
City & State Orlando FI Orlando FI					1			plied For t Applicable	
3.L8	US Country S	32/03	Countr	ζ		of Status Desired	Fee	.75 Addi Required	
Name and Address of Current Registered Agent				Name	7. Name and	Address of New Re	egistered Agei	<u>it</u>	
BURNS, PATRICK M 1516 E HILLCREST ST, SUITE 307 ORLANDO, FL 32803				Street Address (B.O. Box Number is Not Acceptable)					
			-	City OC	and O	-	FL	Zip Code	
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  Signature, typed or printed name of registered agent and the lapplicable. (NOTE: Pegistered Agent signature required when reinstating)  DATE									
After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	9. Election Campai Trust Fund Contr	ign Financ	cing _ <b>\$5</b> ,	.00 May Be ed to Fees				
TITLE NAME STREET ADDRESS CITY-SI-ZIP	OFFICERS AND D DPVP BURNS, PATRICK M 455 STONEWOOD LANE MAITLAND, FL 32751	DIRECTORS  Defete		T ADDRESS ST-ZIP	ADDITIONS/	CHANGES TO OFFI		RECTORS Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP -		☐ Delete	TITLE NAME STREET CITY-S	T ADDRESS	-			Change	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		T ADDRESS ST-ZIP				Change	Addition
indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empor , or on an attachment with an address, w	true and accurate and that m wered to execute this report	ny signatu as require	ure shall have the :	same legal effec	ot as if made under o	eth; that I am a	an officer (	or director