

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000072011

FILED  
Apr 25, 2006  
Secretary of State

Entity Name: NEVEL & GREENFIELD, P.A.

## Current Principal Place of Business:

11900 BISCAYNE BLVD  
SUITE 612  
NORTH MIAMI, FL 33181 US

## New Principal Place of Business:

4801 S. UNIVERSITY DR.  
SUITE 217  
DAVIE, FL 33328 US

## Current Mailing Address:

11900 BISCAYNE BLVD  
SUITE 612  
NORTH MIAMI, FL 33181 US

## New Mailing Address:

4801 S. UNIVERSITY DR.  
SUITE 217  
DAVIE, FL 33328 US

FEI Number: 65-1027478

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NEVEL, DAVID H  
11900 BISCAYNE BLVD  
SUITE 612  
NORTH MIAMI, FL 33181 US

## Name and Address of New Registered Agent:

NEVEL, DAVID H  
4801 S. UNIVERSITY DR.  
SUITE 2060  
DAVIE, FL 33328 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: \_\_\_\_\_

04/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: NEVEL, DAVID H  
Address: 11900 BISCAYNE BLVD SUITE 612  
City-St-Zip: NORTH MIAMI, FL 33181

Title: S (X) Delete  
Name: GREENFIELD, JOHN  
Address: 11900 BISCAYNE BLVD SUITE 612  
City-St-Zip: NORTH MIAMI, FL 33181

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: NEVEL, DAVID H  
Address: 4801 S. UNIVERSITY DR. SUITE 2060  
City-St-Zip: DAVIE, FL 33328

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DAVID H. NEVEL

PD

04/25/2006

Electronic Signature of Signing Officer or Director

Date