FILED 2006 FOR PROFIT CORPORATION Jan 25, 2006 08:00 AM **ANNUAL REPORT Secretary of State** DOCUMENT # P01000001051 JOHN A. RUDOLPH, JR., P.A. Principal Place of Business Mailing Address 1680 METROPOLITAN CIR. 1680 METROPOLITAN CIR. TALLAHASSEE, FL 32308 TALLAHASSEE, FL 32308 No Chg-P CR2E034 (11/05) 01042006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3690218 Not Applicable \$8.75 Additional Fee Required 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent RUDOLPH, JOHN A JR DO NOT WRITE 1680 METROPOLITAN CIR. TALLAHASSEE, FL 32308 IN THIS SPACE 3. 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 //00000400331 02/01/06-80049-005 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10, OFFICERS AND DIRECTORS TITLE RUDOLPH, JOHN A JR NAME STREET ADDRESS 1680 METROPOLITAN CIR. CITY-SI-ZIP TALLAHASSEE, FL 32308 TITLE RUDOLPH, JOHNA J NAME STREET ADDRESS 1680 METROPOLITAN CIR. CITY-ST-ZIP TALLAHASSEE, FL 32308 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST- ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS.

12. Thereby 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:

SIGNATURE AND TYPEU OR PRINTED NAME OFFICER OR DIRECTOR

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