

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000010724

Entity Name: MARGIE ANN ANKROM, P.A.

FILED
Feb 25, 2007
Secretary of State

Current Principal Place of Business:

PALM WEST HOME REALTY
2 FLORIDA PARK DR
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

PO BOX 351820
PALM COAST, FL 321351820

New Mailing Address:

PO BOX 351820
PALM COAST, FL 32135-182 0

FEI Number: 59-3694423

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANKREM, MARGIE
19 BARKLEY LANG
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

ANKROM, MARGIE A
19 BARKLEY LANE
PALM COAST, FL 32137 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: MARGIE ANN ANKROM, PA

02/25/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ANKROM, MARGIE ANN
Address: PO BOX 351820
City-St-Zip: PALM COAST, FL 321351820

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ANKROM, MARGIE ANN
Address: PO BOX 351820
City-St-Zip: PALM COAST, FL 32135-182 0

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: MARGIE ANN ANKROM

D

02/25/2007

Electronic Signature of Signing Officer or Director

Date