

2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
May 08, 2006
Secretary of State**

DOCUMENT# P01000047247

Entity Name: IRENE WILLIAMSON, P.A.

Current Principal Place of Business:

113 SPRING CHASE
ALTAMONTE, FL 32714

New Principal Place of Business:

Current Mailing Address:

113 SPRING CHASE CIR
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 59-3715895 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMSON, IRENE H
113 SPRING CHASE CIR
ALTAMONTE, FL 32714 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: WILLIAMSON, IRENE H
Address: 113 SPRING CHASE
City-St-Zip: ALTAMONTE, FL 32714 US

Title: DT () Delete
Name: WILLIAMSON, F
Address: 113 SPRING CHASE
City-St-Zip: ALTAMONTE, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: F WILLIAMSON

DT

05/08/2006

Electronic Signature of Signing Officer or Director

_____ Date