2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P01000098516

MEDIATION SERVICES OF SOUTHERN FLORIDA, INC.



FILED Apr 23, 2007 08:00 AM Secretary of State

Principal Place of Business 3277 FRUITVILLE RD

BLDG C-1 SARASOTA, FL 34237 Mailing Address

3277 FRUITVILLE RD BLDG C-1 SARASOTA, FL 34237



DO NOT WRITE IN THIS SPACE

04192007	No Chg-P	CR2E034 (11/05)

4. FEI Number		Applied For	
65-1144377		Not Applicable	
5. Certificate of Status Desired		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

TELFORD, LESLIE 3277 FRUITVILLE RD BLDG C-1 SARASOTA, FL 34237

the obligations of registered agent.

SIGNATURE:

DO NOT WRITE IN THIS SPACE

SIGNATURE	Signature, typed or printed name of registered agent and title	spplicable. (NOTE: Registered	Agent eignetun	required when reinstating)	DATE		
FIL After M	E NOW!!! FEE IS \$150.00 by 1, 2007 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	ing 🗆	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS					
NAME STREET ADDRESS CITY-ST-ZIP	DTVP TELFORD, LESLIE 3277 FRUITVILLE RD BLDG C-1 SARASOTA, FL 34237						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KETTRING, GARY H 3277 FRUITVILLE RD BLDG C-1 SARASOTA, FL 34237				U00000722951 05/02/07-80053-003 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				!N	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby 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 yustee 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 yith an address, with all other like empowered.							

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