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Secretary of State
04-26-2007 90212 050 ***150.00

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000107198

1. Entity Name
AUDIOLOGY CONSULTING & EVALUATION SERVICES, INC.

Principal Place of Business	Mailing Address
1389 S PURPLE MARTIN TERR INVERNESS, FL 34450	1389 S PURPLE MARTIN TERR INVERNESS, FL 34450

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

01152007 Chg-P CR2E034 (12/06)

4. FEI Number 59-3759210 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JOSEPH CO CPA INC 2450 N. CITRUS HILLS BLVD. HERNANDO, FL 34442	Name: OLIVER - JOSEPH P.A. Street Address (P.O. Box Number is Not Acceptable): 2450 N. CITRUS HILLS BLVD City: HERNANDO FL Zip Code: 34442

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 the obligations of registered agent.

SIGNATURE: _____ DATE
(Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KREUTCHIC, DIANA C 1389 S PURPLE MARTIN TERR INVERNESS, FL 34450	☐ Delete	Director Dana Holland 1389 S Purple Martin Terr Inverness FL 34450	☐ Change ☒ Addition
		☐ Delete	Director Diana C Holland 1389 S Purple Martin Terrace Inverness FL 34450	☒ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition

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 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: Diana C Kreutchic March 15, 2007
(Signature and typed or printed name of signing officer or director) (Date) (Daytime Phone #)