2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000107682

1. Entity Name

BERNARD KANNER, ATTORNEY, P.A.



FILED Apr 09, 2007 08:00 A Secretary of State

Principal Place of Business

5665 CENTRAL AVE.

ST. PETERSBURG, FL 33710

Mailing Address

5665 CENTRAL AVE.

ST. PETERSBURG, FL 33710



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

No Chg-P CR2E034 (11/05) 01032007

4. FEI Number 59-3755191 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

7-*345-103*0

6. Name and Address of Current Registered Agent

KANNER, BERNARD 5665 CENTRAL AVE. ST. PETERSBURG, FL 33710

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	<i>:</i>
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KANNER, BERNARD 5665 CENTRAL AVE. ST. PETERSBURG, FL 33710				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000695676 04/17/07-80068-019 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-SI-ZIP				IN '	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 fine 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.					