## FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P01000115545** 1. Entity Name NEEL & O'BRIEN, P.A.

Principal Place of Business

SIGNATURE:

SIGNATURE AND TOTAL

3403-A HANCOCK BRIDGE PARKWAY NORTH FORT MYERS, FL 33903

· - - Mailing Address

3403-A HANCOCK BRIDGE PARKWAY NORTH FORT MYERS, FL 33903

**FILED** Jan 17, 2006 08:00 AM **Secretary of State** 



01122006

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-1158589 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

NEEL, JAMES A 3403-Á HANCOCK BRIDGE PARKWAY NORTH FORT MYERS, FL 33903

## DO NOT WRITE IN THIS SPACE

01-13-2006

239-997-967

Daylime Phone #

the obligation	named entity submits this statement for the pons of registered agent	· ·		egistered agent, or bo a required when reinstaling)	oth, in the State of Fl	orīda. Lam famil	ar with, and acc
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Financin     Trust Fund Contribution.	g []	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIRE	CTORS			•		T-1:
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NEEL, JAMES A 3403-A HANCOCK BRIDGE PARKWA NORTH FORT MYERS, FL 33903	ΑΥ			Unanana	29557	
title Name Street address City-S7-Zip					00000031 01/20/06-8	0051-016	150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT V	VRITE	
TITLE NAME STREET ADDRESS CXTY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		IN	THIS S	PACE	
TITLE NAME STREET ADDRESS CITY -ST-ZIP			-				•••
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	(C)			·		
12. I hereby indicated of the co-	certify that the information supplied with this don this report or supplemental report is true rporation or the receiver or trustee empowers , or on an attachment with an address, with a	filing does not qualify for the exert and accurate and that my signature ed to execute this report as require all other like empowered	iptions creeshall had by Cha	ontained in Chapter 1 ave the same legal eff opter 607, Florida Stati	19, Florida Statutes fect as if made unde utes; and that my na	. I further certify the country of t	that the informer an officer or dis- ock 10 or Block

THAME OF SIGNING OFFICER OR DIRECTOR