

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000118982

FILED
Apr 12, 2006
Secretary of State

Entity Name: GRAY, ACKERMAN & HAINES, P.A.

Current Principal Place of Business:

125 NE 1ST AVENUE
SUITE 1
OCALA, FL 34470

New Principal Place of Business:

125 NE 1ST AVENUE
SUITE 1
OCALA, FL 344706675

Current Mailing Address:

125 NE 1ST AVENUE
SUITE 1
OCALA, FL 34470

New Mailing Address:

125 NE 1ST AVENUE
SUITE 1
OCALA, FL 344706675

FEI Number: 22-3850546

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAINES, TIM D
125 NE 1ST AVENUE
SUITE 1
OCALA, FL 34470 US

Name and Address of New Registered Agent:

HAINES, TIM D
125 NE 1ST AVENUE
SUITE 1
OCALA, FL 344706675 US

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:

04/12/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DV () Delete
Name: GRAY, STEVEN H
Address: 125 NE 1ST AVENUE #1
City-St-Zip: OCALA, FL 34470

Title: DPT () Delete
Name: ACKERMAN, BRYCE W
Address: 125 NE 1ST AVENUE #1
City-St-Zip: OCALA, FL 34470

Title: DS () Delete
Name: HAINES, TIM D
Address: 125 NE 1ST AVENUE #1
City-St-Zip: OCALA, FL 34470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change () Addition
Name: GRAY, STEVEN H
Address: 125 NE 1ST AVENUE #1
City-St-Zip: OCALA, FL 344706675

Title: DPT (X) Change () Addition
Name: ACKERMAN, BRYCE W
Address: 125 NE 1ST AVENUE #1
City-St-Zip: OCALA, FL 344706675

Title: DS (X) Change () Addition
Name: HAINES, TIM D
Address: 125 NE 1ST AVENUE #1
City-St-Zip: OCALA, FL 344706675

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: BRYCE W. ACKERMAN

DP

04/12/2006

Electronic Signature of Signing Officer or Director

Date