

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000119363

Entity Name: SUSAN SULLIVAN, P.A.

FILED  
Mar 24, 2007  
Secretary of State

## Current Principal Place of Business:

13469 N. US HWY 441  
SUITE 101  
THE VILLAGES, FL 32159

## New Principal Place of Business:

4129 C.R. 106  
OXFORD, FL 34484

## Current Mailing Address:

2833 E FT. KING ST.  
OCALA, FL 34470

## New Mailing Address:

FEI Number: 01-0587222

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SULLIVAN, SUSAN  
13469 N. US HWY 441  
THE VILLAGES, FL 32159 US

## Name and Address of New Registered Agent:

SULLIVAN, SUSAN  
4129 C.R. 106  
OXFORD, FL 34484 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: SUSAN SULLIVAN

03/24/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SULLIVAN, SUSAN  
Address: 2833 E. FT. KING ST.  
City-St-Zip: OCALA, FL 34470

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SUSAN SULLIVAN

PD

03/24/2007

Electronic Signature of Signing Officer or Director

Date