

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000012893

Entity Name: A1A TAX & BOOKKEEPING INC

FILED  
Feb 21, 2007  
Secretary of State

## Current Principal Place of Business:

55 LONGWOOD DR  
ORMOND BEACH, FL 32176

## New Principal Place of Business:

1236 A OCEAN SHORE BLVD  
ORMOND BEACH, FL 32176

## Current Mailing Address:

55 LONGWOOD DR  
ORMOND BEACH, FL 32176

## New Mailing Address:

P.O. BOX 1888  
ORMOND BEACH, FL 32175

FEI Number: 01-0596533

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ELLIS, SHERRY  
55 LONGWOOD DR  
ORMOND BEACH, FL 32176 US

## Name and Address of New Registered Agent:

A1A TAX & BOOKKEEPING INC  
1236 A OCEAN SHORE BLVD  
ORMOND BEACH, FL 32176 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: SHERRY ELLIS

02/21/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ELLIS, SHERRY  
Address: 55 LONGWOOD DR.  
City-St-Zip: ORMOND BEACH, FL 32176

Title: VP ( ) Delete  
Name: ELLIS, SHERRY  
Address: 55 LONGWOOD DR.  
City-St-Zip: ORMOND BEACH, FL 32176

Title: ST ( ) Delete  
Name: TULNER, JUDY  
Address: 55 LONGWOOD DR.  
City-St-Zip: ORMOND BEACH, FL 32176

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ELLIS, SHERRY  
Address: P.O. BOX 1888  
City-St-Zip: ORMOND BEACH, FL 32175

Title: VP (X) Change ( ) Addition  
Name: SPAULDING, CHRISTINE  
Address: P.O. BOX 1888  
City-St-Zip: ORMOND BEACH, FL 32175

Title: ST (X) Change ( ) Addition  
Name: TULNER, JUDY  
Address: P.O. BOX 1888  
City-St-Zip: ORMOND BEACH, FL 32175

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: SHERRY ELLIS

P

02/21/2007

Electronic Signature of Signing Officer or Director

Date