

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000018169

FILED
May 02, 2007
Secretary of State

Entity Name: PHOENIX CONSULTANTS, INC.

Current Principal Place of Business:

11781 RED HIBISCUS DR.
BONITA SPRINGS, FL 34135

New Principal Place of Business:

Current Mailing Address:

11781 RED HIBISCUS DR.
BONITA SPRINGS, FL 34135

New Mailing Address:

FEI Number: 03-0390246

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LADEMAN, CARRIE E
3200 TAMIAMI TRAIL NORTH, SUITE 200
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

SHAVER, ANNE
11781 RED HIBISCUS DR.
BONITA SPRINGS, FL 34135 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: ANNE SHAVER

05/02/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: SHAVER, ANNE M
Address: 1378 TRAIL TERRACE DR.
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SHAVER, ANNE M
Address: 11781 RED HIBISCUS DR.
City-St-Zip: BONITA SPRINGS, FL 34135

I hereby certify that the information supplied with this filing does not qualify 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: ANNE SHAVER

PRES

05/02/2007

Electronic Signature of Signing Officer or Director

Date