

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000071625

Entity Name: JAMES A. NOLAN, P.A.

FILED  
Mar 09, 2007  
Secretary of State

## Current Principal Place of Business:

4114 HERSCHEL STREET  
# 105  
JACKSONVILLE, FL 32210

## Current Mailing Address:

4114 HERSCHEL STREET  
# 105  
JACKSONVILLE, FL 32210

## New Principal Place of Business:

4114 HERSCHEL STREET  
SUITE 105  
JACKSONVILLE, FL 32210 US

## New Mailing Address:

4114 HERSCHEL STREET  
SUITE105  
JACKSONVILLE, FL 32210 US

FEI Number: 04-3703567

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NOLAN, JAMES A  
4114 HERSCHEL STREET  
# 105  
JACKSONVILLE, FL 32210 US

## Name and Address of New Registered Agent:

NOLAN, JAMES A  
4114 HERSCHEL STREET  
SUITE 105  
JACKSONVILLE, FL 32210 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:

03/09/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: NOLAN, JAMES A  
Address: 4114 HERSCHEL STREET #105  
City-St-Zip: JACKSONVILLE, FL 32210

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: NOLAN, JAMES A  
Address: 4114 HERSCHEL STREET, SUITE105  
City-St-Zip: JACKSONVILLE, FL 32210 US

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: JAMES A. NOLAN

DPS

03/09/2007

Electronic Signature of Signing Officer or Director

Date