

# **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000084470

**FILED**  
**Apr 25, 2007**  
**Secretary of State**

**Entity Name:** LAW OFFICES OF PRISCILLA RYAN, P.A.

**Current Principal Place of Business:**

P.O. BOX 687  
LUTZ, FL 33548

**New Principal Place of Business:**

2401 PRAIRIE PL  
LUTZ, FL 33549

**Current Mailing Address:**

P.O. BOX 687  
LUTZ, FL 33548

**New Mailing Address:**

**FEI Number:** 22-3868232

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RYAN, PRISCILLA  
2401 PRAIRIE PLACE  
LUTZ, FL 33549 US

**Name and Address of New Registered Agent:**

RYAN, PRISCILLA  
2401 PRAIRIE PL  
LUTZ, FL 33549 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: PRISCILLA RYAN

04/25/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: RYAN, PRISCILLA  
Address: P.O. BOX 687  
City-St-Zip: LUTZ, FL 33548

**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 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: PRISCILLA RYAN

PST

04/25/2007

Electronic Signature of Signing Officer or Director

Date