2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000098134

Entity Name

CHARLES H. WARWICK, III, P.A.



FILED Mar 28, 2007 08:00 AM Secretary of State

Principal Place of Business

231 BRADLEY PL

SUITE 201 PALM BCH, FL 33480 Mailing Address

231 BRADLEY PL SUITE 201

PALM BCH, FL 33480



DO NOT WRITE IN THIS SPACE

03222007 No C

No Chg-P

CR2E034 (11/05)

4. FEI Number 41-2060808 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

WARWICK, CHARLES H III 231 BRADLEY PL SUITE 201 PALM BCH, FL 33480

DO NOT WRITE IN THIS SPACE

8.	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.	I am familiar with, and accept
	the obligations of registered agent.	

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D

NAME WARWICK, CHARLES H III

SIRLET ADDRESS
CITY-ST-ZIP PALM BCH, FL 33480

TITLE

NAME
SIRRET ADDRESS
CITY-ST-ZIP

CITY-ST-ZIP

TOTAL TO

U00000681119 04/04/07-80029-014 150.00

TITLE NAME STREET ADDRESS CITY-S1-ZIP DO NOT WRITE IN THIS SPACE STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as it 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



3/22/07

Daytime Phone #