2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000125174

City-St-Zip:

SAFETY HARBOR, FL 34695

Entity Name: PAGE, WOOLLEY, & COMPANY, P.A

FILED Apr 30, 2007 Secretary of State

•	,					
Current Principal Place of Business:				New Principal Place of Business:		
701 ENTERPRISE ROAD EAST SUITE 401				935 MAIN STREET SUITE A1		
SAFETY HARBOR, FL 34695				SAFETY HARBOR, FL	_ 34695	
Current Mailing Address:				New Mailing Address:		
701 ENTERPRISE ROAD EAST SUITE 401 SAFETY HARBOR, FL 34695				935 MAIN STREET SUITE A1 SAFETY HARBOR, FL 34695		
·			FEI Nun	nber Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
PAGE, THOMAS E III 701 ENTERPRISE ROAD EAST SUITE 401				PAGE, THOMAS E III 935 MAIN STREET SUITE A1		
SAFETY HARBOR, FL 34695 US				SAFETY HARBOR, FL 34695 US		
The above in the State	named entity e of Florida.	submits this statement for the	purpose of	f changing its registered	d office or registered agent, or both,	
SIGNATURE:				04/30/2007		
	Electro	nic Signature of Registered Ag	jent		Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PAGE, THOMA 303 11TH AVE			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	WOOLLEY, D. 1904 WESTLE			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	SD (PAGE, MARY 303 11TH AVE) Delete		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: THOMAS EDWARD PAGE, III PD 04/30/2007