


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90409 046 \*\*\*150.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
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| <b>DOCUMENT # P02000132048</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                               |                                                                                                   |                                                                                                                                                                                                       |  |  |
| <b>1. Entity Name</b><br>DAVID A. IRWIN, P.A.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| <b>Principal Place of Business</b><br>23412 OLDE MEADOWBROOK CIRCLE<br>BONITA SPRINGS, FL 34134                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                               |                                                                                                   | <b>Mailing Address</b><br>23412 OLDE MEADOWBROOK CIRCLE<br>BONITA SPRINGS, FL 34134                                                                                                                   |                                                                                   |  |
| <b>2. Principal Place of Business - No P.O. Box #</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                               | <b>3. Mailing Address</b><br>5107 SW 3rd Ave                                                      |                                                                                                                                                                                                       |                                                                                   |  |
| Suite, Apt. #, etc.<br>5107 SW 3rd Ave                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                               | Suite, Apt. #, etc.                                                                               |                                                                                                                                                                                                       |                                                                                   |  |
| City & State<br>Cape Coral FL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                               | City & State<br>Cape Coral FL                                                                     |                                                                                                                                                                                                       | <b>4. FEI Number</b><br>16-1644046                                                |  |
| Zip<br>33914                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                               | Country<br>USA                                                                                    |                                                                                                                                                                                                       | Applied For<br>Not Applicable                                                     |  |
| <b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                               |                                                                                                   |                                                                                                                                                                                                       | Chg-P CR2E034 (12/06)                                                             |  |
| <b>6. Name and Address of Current Registered Agent</b><br><br>IRWIN, DAVID A<br>23412 OLDE MEADOWBROOK CIRCLE<br>BONITA SPRINGS, FL 34134                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                               |                                                                                                   | <b>7. Name and Address of New Registered Agent</b><br><br>Name<br>Street Address (P.O. Box Number is not acceptable)<br>5107 SW 3rd Ave (change in address only)<br>City Cape Coral FL Zip Code 33914 |                                                                                   |  |
| <b>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</b><br><br>SIGNATURE <u>David A Irwin</u> DATE <u>4/26/2007</u><br><small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when translating)</small>                                                                                                                                                                                         |                                                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2007 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                               | <b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |                                                                                                                                                                                                       |                                                                                   |  |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | P IRWIN, DAVID A <input type="checkbox"/> Delete<br>23412 OLDE MEADOWBROOK CIRCLE<br>BONITA SPRINGS, FL 34134 |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Delete                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Delete                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Delete                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Delete                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Delete                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Delete                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br>5107 SW 3rd Ave in address only,<br>Cape Coral FL 33914 DAVID A Irwin is<br>still Agent                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| <b>12. I hereby certify that the information supplied with this filing 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</b> |                                                                                                               |                                                                                                   |                                                                                                                                                                                                       |                                                                                   |  |
| <b>SIGNATURE:</b> <u>David A. Irwin</u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                               |                                                                                                   |                                                                                                                                                                                                       | Date <u>4/26/2007</u> 239-405-2537<br><small>Daytime Phone #</small>              |  |