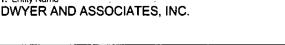
## **2008 FOR PROFIT CORPORATION**

## ANNUAL REPORT **DOCUMENT # P03000027225** 1. Entity Name DWYER AND ASSOCIATES, INC.

**FILED** Jan 14, 2008 08:00 Al Secretary of State





Principal Place of Business

Mailing Address

3381 REGAL CREST DR LONGWOOD, FL 32779

3381 REGAL CREST DR LONGWOOD, FL 32779



01082008 No Chg-P CR2E034 (11/05)

Applied For 4. FEI Number 56-2330949 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

DWYER, MICHAEL J 3381 REGAL CREST DRIVE LONGWOOD, FL 32779

## DO NOT WRITE IN THIS SPACE

1-9-08

407-804-0278 Daytime Phone #

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)					U00000 Wel 531				
	· · · · · · · · · · · · · · · · · · ·					<del>15/05-5</del>		<del>H 150.</del>	<del>. 00</del>
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Fir			cing	\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIRECTORS			repairin	1,5345.3			W23351	4.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DWYER, MICHAEL J 3381 REGAL CREST DR. LONGWOOD, FL 32779								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DWYER, JUDY M 3381 REGAL CREST DR. LONGWOOD, FL 32779								
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT	WRI			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS	SPAC	E		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP									The second second
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.									

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