.2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2006 08:00 AM Secretary of State

DOCUMENT # P03000036438 1. Entity Name HELEN DUNN L.C.S.W., P.A.								·		
Principal Place of Business 909 TAMIAMI TRL. S STE. #110 NOKOMIS, FL 34275			STE. #110	909 TAMIAMI TRL. S			# 1801 ## 01 0 10 0 6 0			
2. Principal Place of Business			3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.			Chg-P	CR2E034	(11/05)	<u></u>
City & State			City & State	City & State		4. FEI Numb 55-082			→	plied For Applicable
Ζip	Country		Zip	Cour	ntry	5. Certificate	of Status Desired	□ \$8 Fe	.75 Add Required	filtional o
Name and Address of Current Registered Agent DUNN, HELEN 909 TAMIAMI TRL. S					Name	7. Name and	d Address of New F	legistered Age	nt	
					Street Address	(P.O. Box Numb	per is Not Acceptable	e)		
VENICE, FL 34285				•						
					City			FL	Zip Cade	9
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 retrestating) DATE										
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees										
10.		OFF(CERS	AND DIRECTORS	11.		ADDITIONS	/CHANGES TO OFF			
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12. I hereby certify that the information supplied with this lifting 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 early that I am an officer or director of the corporation or the receiver or trustee empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attagramment with an address, with all other like empowered.										
cuanged	rporation or t	he receiver or trustee actiment with an add	empowered to execute this re less, with all other like empower	port as requ ered.	ired by Chapter 60	7, Florida Statut	est and that my nam	e appears in B	lock 10 or	Block 11 If

Helen Dunn