


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2007 8:00 am
Secretary of State

05-14-2007 90075 024 ***150.00

DOCUMENT # P03000111706 1. Entity Name SUZANNE E. STOKOE, P.A.																																																																																		
Principal Place of Business 17723 RIVENDEL RD LUTZ, FL 33549			Mailing Address P.O. BOX 2269 LUTZ, FL 33548																																																																															
2. Principal Place of Business - No P.O. Box # 17723 RIVENDEL RD		3. Mailing Address Suite, Apt. #, etc.																																																																																
City & State Lutz, FL		City & State																																																																																
Zip 33549		Country		Zip Country																																																																														
6. Name and Address of Current Registered Agent STOKOE, SUZANNE E 17723 RIVENDEL RD LUTZ, FL 33549				7. Name and Address of New Registered Agent Name Suzanne Ellen Young Street Address (P.O. Box Number is Not Acceptable) 17723 RIVENDEL RD City Lutz FL Zip Code 33549																																																																														
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 <i>Suzanne Ellen Young</i> DATE 4-21-07 <small>(Signature, printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating))</small>																																																																																		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																															
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%;">D</td> <td style="width:10%; text-align: right;">Delete</td> <td style="width:10%;">NAME</td> <td colspan="2">STOKOE, SUZANNE E</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="5">3406 CRENSHAW LAKE RD</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="5">LUTZ, FL 33543</td> </tr> </table>			TITLE	D	Delete	NAME	STOKOE, SUZANNE E		STREET ADDRESS	3406 CRENSHAW LAKE RD					CITY-ST-ZIP	LUTZ, FL 33543					11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%;">Director</td> <td style="width:10%; text-align: right;">Change</td> <td style="width:10%;">NAME</td> <td colspan="2">Suzanne Ellen Young</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="5">17723 RIVENDEL RD</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="5">LUTZ, FL 33549</td> </tr> </table>			TITLE	Director	Change	NAME	Suzanne Ellen Young		STREET ADDRESS	17723 RIVENDEL RD					CITY-ST-ZIP	LUTZ, FL 33549																																													
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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.																																																																																		
SIGNATURE: <i>Suzanne Ellen Young</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date 4-21-07 Daytime Phone # 813-263-9301																																																																															