


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 13, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P03000112376  
1. Entity Name  
ROSALIE JEFFERSON, P.A.



Principal Place of Business      Mailing Address  
718 GRISHAM STREET      718 GRISHAM STREET  
WINTER GARDEN, FL 34787      WINTER GARDEN, FL 34787

**DO NOT WRITE IN THIS SPACE**



03062006    No Chg-P    CR2E034 (11/05)

4. FEI Number 27-0067353	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
  
JEFFERSON, ROSALIE  
718 GRISHAM STREET  
WINTER GARDEN, FL 34787

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IN THIS SPACE**

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 Rosalie Jefferson      3/16/06  
Signature, typed or printed name of registered agent and title if applicable      (NOTE: Registered Agent signature required when re-registering)      DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00** May Be Added to Fees

1100000463217  
03/21/06-80068-006 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JEFFERSON, ROSALIE 718 GRISHAM STREET WINTER GARDEN, FL 34787
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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: Rosalie Jefferson      3/16/06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #