2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P03000140583

1. Entity Name

H.C. ZORN & ASSOCIATES, INC.



FILED Apr 23, 2007 08:00 AM Secretary of State

Principal Place of Business

15909 ELLSWORTH DRIVE TAMPA, FL 33647

Mailing Address

15909 ELLSWORTH DRIVE TAMPA, FL 33647



 \Box

04192007

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-0490604

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FARAGE, NANCY G 707 N. FRANKLIN STREET, 4TH FLOOR TAMPA, FL 33602

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the obligat	named entity submits this statement for the plions of registered agent.	ourpose of changing its regist	ered office or r	egistered agent, o	or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registr	ored Agent signature	required when reinstating	g) DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Fin Trust Fund Contribution		\$5.00 May B Added to Fees	е	
10.	OFFICERS AND DIREC	CTORS			**************************************	
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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: Sarvey of vorus