

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000032986

Entity Name: ROBERT M. BURSON, P.A.

FILED  
Apr 21, 2006  
Secretary of State

## Current Principal Place of Business:

4765 ESTERO BLVD  
FT MYERS BCH, FL 33931

## New Principal Place of Business:

2700 HARBORTOWN DR.  
MERRITT ISLAND, FL 32952

## Current Mailing Address:

4765 ESTERO BLVD  
FT MYERS BCH, FL 33931

## New Mailing Address:

P.O. BOX 2534  
BLUE RIDGE, GA 30513

FEI Number: 45-0535007

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BURSON, BOB  
4765 ESTERO BLVD  
FT MYERS BCH, FL 33931 US

## Name and Address of New Registered Agent:

BURSON, BOB  
2700 HARBORTOWN DR.  
MERRITT ISLAND, FL 32952 US

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.

SIGNATURE:

04/21/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BURSON, BOB  
Address: 4765 ESTERO BLVD  
City-St-Zip: FT MYERS BCH, FL 33931

Title: D ( ) Delete  
Name: BURSON, MARYLYN W  
Address: 4765 ESTERO BLVD  
City-St-Zip: FT MYERS BCH, FL 33931

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: BURSON, BOB  
Address: 2700 HARBORTOWN DR.  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D (X) Change ( ) Addition  
Name: BURSON, MARYLYN W  
Address: 2700 HARBORTOWN DR.  
City-St-Zip: MERRITT ISLAND, FL 32952

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT M BURSON

D

04/21/2006

Electronic Signature of Signing Officer or Director

Date