## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000037949

Entity Name: ANDREW LOCKWOOD, P.A.

FILED Apr 10, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1801 NORTH PINE ISLAND ROAD SUITE 102 1290 WESTON ROAD SUITE 300

PLANTATION, FL 33322 WESTON, FL 33326

Current Mailing Address: New Mailing Address:

1801 NORTH PINE ISLAND ROAD SUITE 102 1290 WESTON ROAD SUITE 300

PLANTATION, FL 33322 SOITE 300
WESTON, FL 33326

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LOCKWOOD, ANDREW

1801 NORTH PINE ISLAND ROAD

102

PLANTATION, FL 33322 US

LOCKWOOD, ANDREW

1290 WESTON ROAD

SUITE 300

WESTON, FL 33326 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: ANDREW LOCKWOOD 04/10/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 LOCKWOOD, ANDREW
 Name:
 LOCKWOOD, ANDREW

 Address:
 1801 NORTH PINE ISLAND ROAD STE 102
 Address:
 1290 WESTON ROAD

 City-St-Zip:
 PLANTATION, FL 33322
 City-St-Zip:
 WESTON, FL 33326

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: ANDREW LOCKWOOD PRES 04/10/2006