2007 FOR PROFIT CORPORATION

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DOCL	ANNUAL REPORT				Jan 24, 2007 08:00		
DOCO	MENT # P0400004	6032			Sec	retary of Sta	
1. Entity Nan ROBERT	L. TROIKE, P.A.						
•	e of Business OTH TERRACE	Mailing Address 13625 SE 90TH TERRACE					
	LD, FL 34491	SUMMERFIELD, FL 34491					
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				4. FEI Number 84-164137	73	Applied For Not Applicable	
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	5. Name and Address of Currer	it Registered Agent				Fee Required	
TROIKE, I	ROBERT L				AT WILL		
13625 SE			Maria Para Para Para Para Para Para Para		OT WR		
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	named entity submits this statement itions of registered agent.	for the purpose of changing its registe	red office or register	ed agent, or both, in	the State of Florida	. I am familiar with, and accept	
SIGNATURE.							
	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: Reguste	ed Agent aignature required	when renstating)		DATE	
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	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550	Election Campaign Fina Trust Fund Contribution		00 May Be ad to Fees		N	
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12. I hereby certify that the information supplied with this filling 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:

CITY-ST-ZIP

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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