2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# P04000047860

Entity Name: PROFESSIONAL CONCEPTS OF N.W. FLORIDA, INC.

Current Principal Place of Business:

210 NORTH GARFIELD DRIVE
PENSACOLA, FL 32505

New Principal Place of Business:

2139 STENNIS DR
PENSACOLA, FL 32506

Current Mailing Address:

210 NORTH GARFIELD DRIVE
PENSACOLA, FL 32505

New Mailing Address:

2139 STENNIS
PENSACOLA, FL 32506

FEI Number: 30-0249434 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HORNE, DARON B
210 NORTH GARFIELD DRIVE
PENSACOLA, FL 32505 US

Name and Address of New Registered Agent:

HORNE, DARON B
2139 STENNIS DR
PENSACOLA, FL 32506 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: _____ 04/30/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: HORNE, DARON B
Address: 210 NORTH GARFIELD DRIVE
City-St-Zip: PENSACOLA, FL 32505

Title: S ( ) Delete
Name: HORNE, TRICIA D
Address: 210 NORTH GARFIELD DRIVE
City-St-Zip: PENSACOLA, FL 32505

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: HORNE, DARON B
Address: 2139 STENNIS DR
City-St-Zip: PENSACOLA, FL 32506

Title: S (X) Change ( ) Addition
Name: HORNE, TRICIA D
Address: 2139 STENNIS DR
City-St-Zip: PENSACOLA, FL 32506

I hereby certify that the information supplied with this filing does not qualify 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: TRICIA D HORNE S 04/30/2007
Electronic Signature of Signing Officer or Director — Date