

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P04000053910

1. Entity Name  
JOHN J. ELL, JR., P.A.



Principal Place of Business  
8978 JENA ROAD  
SPRING HILL, FL 34608 US

Mailing Address  
8978 JENA ROAD  
SPRING HILL, FL 34608 US

**FILED  
Mar 12, 2007 08:00 AM  
Secretary of State**

**DO NOT WRITE IN THIS SPACE**

01112007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0927572	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	



6. Name and Address of Current Registered Agent

ELL, JOHN J JR  
8978 JENA ROAD  
SPRING HILL, FL 34608

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.  \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P, T  
NAME ELL, JOHN J JR  
STREET ADDRESS 8978 JENA ROAD  
CITY-ST-ZIP SPRING HILL, FL 34608

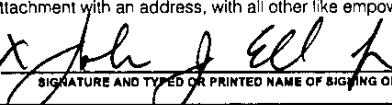
TITLE VP,S  
NAME ELL, DEBRA M  
STREET ADDRESS 8978 JENA ROAD  
CITY-ST-ZIP SPRING HILL, FL 34608

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

UD00000662547  
03/21/07-80019-005 150.00

**DO NOT WRITE  
IN THIS SPACE**

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: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 1/22/07 X352-683-5296  
Daytime Phone #