## **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

## Apr 13, 2007 08:00 AM Secretary of State DOCUMENT # P04000069845 ROBERT A NELSON, INC. Principal Place of Business Mailing Address 3091 WILLOW GREEN 3091 WILLOW GREEN SARASOTA, FL 34235 SARASOTA, FL 34235 No Cha-P CR2E034 (11/05) 03102007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1125158 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NELSON, ROBERT DO NOT WRITE 3091 WILLOW GREEN SARASOTA, FL 34235 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. (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Added to Fees Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE NELSON, ROBERT STREET ADDRESS 3091 WILLOW GREEN CITY-ST-ZIP SARASOTA, FL 34235 U00000704561 04/23/07-80016-004 150.00 TITLE STREET ADDRESS CITY-ST-ZIP NAME STREE! ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE HILF NAME STREET ADDRESS CITY-ST-ZIP HILE STREET ADDRESS City-ST-ZiP TITLE NAME

12. Thereby 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 fustee-empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in changed, or on an attachment, with an address, with all other like empowered.

SIGNATURE: 1

STREET ADDRESS

NG OFFICER OR DIRECTOR

**FILED**