2007 FOR PROFIT CORPORATION

FILED Jan 29, 2007 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # P04000071154 1. Entity Name ROBERT R. HUSSEY CO., P.A. Mailing Address Principal Place of Business 3141 GLENBROOK DRIVE 3141 GLENBROOK DRIVE FT. MYERS, FL 33917 N. FT. MYERS, FL 33917 01252007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1072870 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE ROBERT, HUSSEY R 3141 GLENBROOK DRIVE IN THIS SPACE FT, MYERS, FL 33917 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. INOTE Registered Agent signature required when reinstating) UOOOOOSŬ\$785 \$5.00 May Be 02/01/07-80064-012 150.00 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE PΩ HUSSEY, ROBERT NAME 3141 GLENBROOK DR STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33917 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET AODRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 oddress, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP TITLE MALLE STREET ADDRESS