

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000094050

FILED
Apr 17, 2007
Secretary of State

Entity Name: COUNSEL SELECT FINANCIAL, INC.

Current Principal Place of Business:

4204 N NEBRASKA AVE
TAMPA, FL 33603

New Principal Place of Business:

Current Mailing Address:

4204 N NEBRASKA AVE
TAMPA, FL 33603

New Mailing Address:

FEI Number: 55-0874079

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRITZ, JOSEPH R
4204 NORTH NEBRASKA AVENUE
TAMPA, FL 33603 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FRITZ, JOSEPH R
Address: 4204 N NEBRASKA AVE
City-St-Zip: TAMPA, FL 33603

Title: D () Delete
Name: DAVIS, ROY G
Address: 3224 MCINTOSH ROAD
City-St-Zip: DOVER, FL 33527

Title: VD () Delete
Name: JOHNSON, ROGER D
Address: 9901 BAY DRIVE
City-St-Zip: GIBSONTON, FL 33534

Title: ST () Delete
Name: CHAVARRIA, MERRY JO
Address: 2213 WEST OHIO AVENUE
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MERRY JO CHAVARRIA

ST

04/17/2007

Electronic Signature of Signing Officer or Director

Date