2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 03, 2006 08:00 AM Secretary of State

DOCUMENT # PU4000109994 1. Entity Name FIRST CHOICE FIRST ASSISTANT P.A.				Secretary of State			
Principal Place of Business 25291 BUNTING CIRCLE LAND O'LAKES, FL 34639 Mailing Address 25291 BUNTING CIRCLE LAND O'LAKES, FL 34639 US Mailing Address 25291 BUNTING CIRCLE LAND O'LAKES, FL 34639		US					
SCHINKEI 25291 BUI	6. Name and Address of Current Res		CE	DO	Na Chg-P	RITE	
the obligat	named entity submits this statement for the ions of registered agent. Sgrature, special principles of registered agent with with E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00		red Agent signatura required		h, in the State of Flor	rida. I am familia	ar with, and accept
10. VITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	OFFICERS AND DIF P SCHINKEL, JEFFREY T 25291 BUNTING CIRCLE LAND O'LAKES, FL 34639	ECTORS					
NAME STREET ADDRESS CHY-SI-ZIP TITLE NAME					U000004 02/13/06-8	17554 0051-017	159,00
STREET ADDRESS CITY-ST-ZIP TITLE HAMAL STREET ADDRESS CHTY-ST-ZIP					NOT W THIS SP		en er
HILL NAME STREET ADDRESS CHY-SI-ZIP TITLE NAME							
STREET ADDRESS CHY-SI-JIP 12. I horeby a indicated of the cor	portily that the information supplied with the on this report or supplemental report is truporation or the receiver or trustee empower or on an attachment with an address, with	s filling does not quality for the ea e and accurate and that my signs red to execute this report as requ all other like empowered.	nemptions contained ature shall have the litted by Chapter 607	d in Chapter 119 same legal effect, Florida Statute	, Florida Statutes 1 t as if made under o s; and that my name	further certify the aff; that I am an appears in Block	at the information officer or director ik 10 or Block 11 if

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR