

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000114917

FILED
Jan 04, 2006
Secretary of State

Entity Name: D & R ACCOUNTING MANAGEMENT, INC.

Current Principal Place of Business:

12555 ORANGE DRIVE
SUITE 123
DAVIE, FL 33330

New Principal Place of Business:

Current Mailing Address:

12555 ORANGE DRIVE
SUITE 123
DAVIE, FL 33330 US

New Mailing Address:

FEI Number: 20-1458899 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAHILL, RAYMOND C
12555 ORANGE DRIVE
SUITE 123
DAVIE, FL 33330 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: P () Delete
Name: CAHILL, RAYMOND C
Address: 12555 ORANGE DRIVE, SUITE 123
City-St-Zip: DAVIE, FL 33330 US

Title: S () Delete
Name: ROTH, DONNA G
Address: PO BOX 823497
City-St-Zip: PEMBROKE PINES, FL 33082 US

Title: VP () Delete
Name: ROTH, RICHARD
Address: PO BOX 823497
City-St-Zip: PEMBROKE PINES, FL 33082 US

Title: T () Delete
Name: CAHILL, JOANNE
Address: 12555 ORANGE DRIVE, SUITE 123
City-St-Zip: DAVIE, FL 33330

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: DONNA G. ROTH

S

01/04/2006

Electronic Signature of Signing Officer or Director

Date