

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000139670

Entity Name: HERRMANN, PA

FILED  
Jul 01, 2006  
Secretary of State

## Current Principal Place of Business:

645 SE 21ST PLACE  
OCALA, FL 344715301

## New Principal Place of Business:

645 SE 21ST PLACE  
OCALA, FL 34471

## Current Mailing Address:

645 SE 21ST PLACE  
OCALA, FL 344715301

## New Mailing Address:

645 SE 21ST PLACE  
OCALA, FL 34471

FEI Number: 27-0106185

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HERRMANN, JODDEN  
645 SE 21ST PLACE  
OCALA, FL 34471 US

## Name and Address of New Registered Agent:

HERRMANN, LADDEN  
645 SE 21ST PLACE  
OCALA, FL 34471 US

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: LADDEN HERRMANN

07/01/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HERRMANN, LADDEN  
Address: 645 SE 21ST PLACE  
City-St-Zip: OCALA, FL 344715301

Title: V ( ) Delete  
Name: HERRMANN, LISA  
Address: 645 SE 21ST PLACE  
City-St-Zip: OCALA, FL 34471

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: HERRMANN, LADDEN  
Address: 645 SE 21ST PLACE  
City-St-Zip: OCALA, FL 34471

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: LISA HERRMANN

V

07/01/2006

Electronic Signature of Signing Officer or Director

Date