## 2007 FOR PROFIT CORPORATION .- ANNUAL REPORT

## **FILED** Feb 01, 2007 08:00 AM DOCUMENT # P04000147198 **Secretary of State** YARDLEY ASSOCIATES INC. Principal Place of Business Mailing Address 6477 MARBLE TREE LANE 6477 MARBLE TREE LANE LAKE WORTH, FL 33467 LAKE WORTH, FL 33467 01172007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 11-2735512 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JOHNSON, RICHARD DO NOT WRITE 6477 MARBLE TREE LANE LAKE WORTH, FL 33467 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 000000614644 FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be 02/06/07-80037-022 150.80 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS BILE NAME JOHNSON, RICHARD STREET ADDRESS 6477 MARBLE TREE LANE CITY-ST-ZIP LAKE WORTH, FL 33467 NAME STREET ADDRESS CUTY - ST - ZIP THE NAME STREET ADDRESS DO NOT WRITE CITY - S1 - ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling 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 eath; 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 address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET AUDRESS

RICHARD J- JOHNSON //29/07 561-968-1900