

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000163797

FILED
Apr 25, 2006
Secretary of State

Entity Name: FEDERATED LEGAL FORMS OF AMERICA, INC.

Current Principal Place of Business:

2211 FRUITVILLE RD
SARASOTA, FL 34237

New Principal Place of Business:

Current Mailing Address:

2211 FRUITVILLE RD
SARASOTA, FL 34237

New Mailing Address:

FEI Number: 06-1735964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VENGROFF, HARVEY
2211 FRUITVILLE RD.
SARASOTA, FL 34237 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: COB () Delete
Name: VENGROFF, HARVEY COB
Address: 2211 FRUITVILLE RD
City-St-Zip: SARASOTA, FL 34237

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
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Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CFO () Change (X) Addition
Name: WILLIAMS, ROBERT G CFO, CEO
Address: 2211 FRUITVILLE ROAD
City-St-Zip: SARASOTA, FL 34237

Title: CEO () Change (X) Addition
Name: VENGROFF, MARK K CEO
Address: 7441 LINCOLN WAY
City-St-Zip: GARDEN GROVE, CA 92841

Title: VICE () Change (X) Addition
Name: VENGROFF, JOEL H VICE
Address: 777 LARKFIELD ROAD
City-St-Zip: COMMACK, NY 11725

Title: SECR () Change (X) Addition
Name: VENGROFF, KRISTY L SECR
Address: 777 LARKFIELD ROAD
City-St-Zip: COMMACK, NY 11725

Title: CTO () Change (X) Addition
Name: TOREK, GABE V
Address: 2211 FRUITVILLE ROAD
City-St-Zip: SARASOTA, FL 34237

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: DAVID L. KING, J.D.

CO

04/25/2006

Electronic Signature of Signing Officer or Director

_____ Date