2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # P04000171486

1. Entity Name
ROBERT F. HUDSON, JR., P.A.

Principal Place of Business	Mailing Address
BAKER & MCKENZIE, LLP 1111 BRICKELL AVENUE, SUITE 1700 MIAMI, FL 33131	BAKER & MCKENZIE, LLP 1111 BRICKELL AVENUE, SUITE 1700 MIAMI, FL 33131

01182007 No Chg-P CR2E034 (11/05)

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4. FEI Number
20-2055262
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HUDSON, ROBERT F JR.
BAKER & MCKENZIE LLP, 1111 BRICKELL AVENUE
SUITE 1700
MIAMI, FL 33131

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000606805
01/31/07-80012-012 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HUDSON, ROBERT F JR.
STREET ADDRESS	1111 BRICKELL AVENUE, SUITE 1700
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: R F Hudson Jr 1-19-07 305 789 8906
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Robert F Hudson Jr., President