

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000172770

Entity Name: STACI L. LUDWIG, CPA, PA

FILED  
Jan 15, 2007  
Secretary of State

**Current Principal Place of Business:**

6005 SILVER OAK DR  
FT PIERCE, FL 34982

**New Principal Place of Business:**

**Current Mailing Address:**

6005 SILVER OAK DR  
FT PIERCE, FL 34982

**New Mailing Address:**

FEI Number: 31-1817965

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LUDWIG, STACI L  
6005 SILVER OAK DR  
FT PIERCE, FL 34982 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: LUDWIG, STACI  
Address: 6005 SILVER OAK DR  
City-St-Zip: FORT PIERCE, FL 34982

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: STACI LUDWIG

P

01/15/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date