

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000002295

Entity Name: TODD A. MOLL, C.F.A., P.A.

FILED
Jan 23, 2006
Secretary of State

Current Principal Place of Business:

515 E LAS OLAS BLVD 5TH FLOOR
FT LAUDERDALE, FL 33301

New Principal Place of Business:

515 E LAS OLAS BLVD
15TH FLOOR
FT LAUDERDALE, FL 33301

Current Mailing Address:

515 E LAS OLAS BLVD 5TH FLOOR
FT LAUDERDALE, FL 33301

New Mailing Address:

515 E LAS OLAS BLVD
15TH FLOOR
FT LAUDERDALE, FL 33301

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOLL, TODD A
515 E LAS OLAS BLVD 5TH FLOOR
FT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

MOLL, TODD A
515 E LAS OLAS BLVD
15TH FLOOR
FT LAUDERDALE, FL 33301 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:

01/23/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: MOLL, TODD A
Address: 515 EAST LAS OLAS BOULEVARD, 15TH FLOOR
City-St-Zip: FORT LAUDERDALE, FL 33301 US

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: TODD A. MOLL

PRES

01/23/2006

Electronic Signature of Signing Officer or Director

Date