2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000006366

FILED Apr 28, 2006 Secretary of State

Entity Name: ∨E	NVEST BALLARD,	INC.					
Current Principal	s:	New Princ	New Principal Place of Business:				
2 N. TAMIAMI TRAIL SUITE 806 SARASOTA, FL 34236				%CLOCKWORK, 2 N. TAMIAMI TRAIL SUITE 806 SARASOTA, FL 34236			
Current Mailing A		New Maili	New Mailing Address:				
2 N. TAMIAMI TRAIL SUITE 806 SARASOTA, FL 34236				%CLOCKWORK, 2 N. TAMIAMI TRAIL SUITE 806 SARASOTA, FL 34236			
FEI Number: 20-2159	110 FEI Number	Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desire	ed ()	
Name and Addres	ss of Current Reg	stered Agent:	Name and	Address of	New Registered Agent:		
LONG, A.J. 2 N. TAMIAMI TRA SARASOTA, FL 3			515 EAST	ECT AGENT PARK AVEN A, FL 32301	NÚE		
The above named in the State of Flori		statement for the p	ourpose of changing i	ts registered	l office or registered agent,	or both,	
SIGNATURE: ED LARY				04/28/2006			
E	lectronic Signature	of Registered Ag	ent		Date		
Election Campaign Fi	nancing Trust Fund C	Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	ABRAMS, JA	I TRAIL, SUITE 806		
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	ABRAMS, JA	II TRAIL, SUITE 806		
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	BECKMANN,	II TRAIL, SUITE 506		
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	MYERS, PAT	I TRAIL, SUITE 806		
Title: Name: Address:	() Delete		Title: Name: Address:	STEWARD,	() Change (X) Addition JEFFREY D II TRAIL SUITE 806		

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.

City-St-Zip: SARASOTA, FL 34236

SIGNATURE: ROBERT F. BECKMANN, SECRETARY S 04/28/2006

City-St-Zip: