2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000012739

Entity Name: TRACIE P. MAUNDER, EA, CB, INC.

FILED Jul 06, 2007 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business |
|--------------------------------------|---------------------------------|

234 SE 1ST ST 20 NE 3RD ST

WILLISTON, FL 32696 STE B WILLISTON, FL 32696

Current Mailing Address: New Mailing Address:

234 SE 1ST ST 20 NE 3RD ST

WILLISTON, FL 32696 STE B

WILLISTON, FL 32696

FEI Number: 20-2210925 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TRACIE P MAUNDER, EA, CB (SOLE PROP) MAUNDER, TRACIE P

234 SE 1ST ST 20 NE 3RD ST

WILLISTON, FL 32696 US STE B
WILLISTON, FL 32696 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: TRACIE P MAUNDER 07/06/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition

 Name:
 MAUNDER, TRACIE P
 Name:

 Address:
 234 SE 1ST ST
 Address:

 City-St-Zip:
 WILLISTON, FL 32696
 City-St-Zip:

Title: VP (X) Delete Title: () Change () Addition

 Name:
 MAUNDER, MICHAEL L
 Name:

 Address:
 234 SE 1ST ST
 Address:

 City-St-Zip:
 WILLISTON, FL 32696
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: TRACIE P MAUNDER PR 07/06/2007