2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000026992

Entity Name: STEINGER ISCOE & GREENE, P.A.

FILED Jan 11, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
900 E. PRIMA VISTA BLVD. SUITE 120 PORT ST. LUCIE, FL 34952				900 E. PRIMA VISTA BLVD. SUITE 101 PORT ST. LUCIE, FL 34952			
Current Mailing Address:				New Mailing Address:			
900 E. PRIMA VISTA BLVD. SUITE 120 PORT ST. LUCIE, FL 34952				900 E. PRIMA VISTA BLVD. SUITE 101 PORT ST. LUCIE, FL 34952			
FEI Number:	: 04-3806956	FEI Number Applied For ()	FEI Nur	nber Not App	licable ()	Certificate of	Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
1645 PALN	R, MICHAEL S M BEACH LAM BEACH, FL 33	(ES BLVD - 9TH FLOOR					
	named entity e of Florida.	submits this statement for th	e purpose c	of changing i	ts registere	ed office or regis	tered agent, or both,
SIGNATUR	RE:						
	Electro	nic Signature of Registered A	Agent			Date	
Election Car	npaign Financir	ng Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	STEINGER, M) Delete ICHAEL S ESQ EACH LAKES BLVD - 9TH FLOOR CH, FL 33480		Title: Name: Address: City-St-Zip:		() Change () Ad	ddition
Title: Name: Address: City-St-Zip:	ISCOE, GARY 1645 PALM BI) Delete T ESQ EACH LAKES BLVD 9TH FLOOR BEACH, FL 33401		Title: Name: Address: City-St-Zip:		() Change () Ad	ddition
Title: Name:	D (GREENE, SEA) Delete N J ESQ		Title: Name:	D GREENE. S	(X) Change()Ao SEAN J ESQ	ddition

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.

Address:

City-St-Zip:

SIGNATURE: SEAN J. GREENE D 01/11/2007

900 E. PRIMA VISTA BLVD., SUITE 120

PORT ST. LUCIE, FL 34952

Address:

City-St-Zip:

900 E. PRIMA VISTA BLVD., SUITE 101

PORT ST. LUCIE, FL 34952