

2006 FOR PROFIT CORPORATION ANNUAL REPORT

7/1

FILED
Jul 28, 2006 8:00 am
Secretary of State


07-13-2006 90023 049 ***150.00

66022356



DOCUMENT # P05000038896

1. Entity Name
 JOHN J CONLEY, P.A.



Principal Place of Business
 900 US HIGHWAY 1 SUITE 104
 LAKE PARK, FL 33403

Mailing Address
 900 US HIGHWAY 1 SUITE 104
 LAKE PARK, FL 33403

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip Country

05162006 Chg-P CR2E034 (11/05)

4. FEI Number
 020740902

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

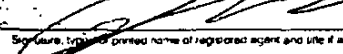
6. Name and Address of Current Registered Agent

CONLEY, JOHN J
 900 US HIGHWAY 1 SUITE 104
 LAKE PARK, FL 33403

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  DATE: 6/8/06

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when transferring)

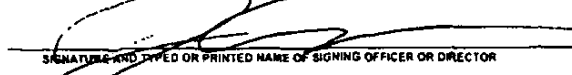
FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CONLEY, JOHN J 900 US HIGHWAY 1 SUITE 104 LAKE PARK, FL 33403 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other I am empowered.

SIGNATURE:  DATE: 6/8/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

561-848-5250

ATTACHMENT

66022356

John J. Conley

#P05000038896

900 US Highway - 1, Suite 101
Lake Park, FL 33403
561-848-5250 Phone
561-296-2722 Fax

Florida Department of State
Division of Corporations
PO Box 6198
Tallahassee, FL 32314

Re: Annual Report for John J Conley, PA

To Whom It May Concern:

I am writing to explain why my annual report is being sent late. My first child was born this year this year and my time has been consumed with caring for him. I hope that you can understand my situation and that I will not be fined for submitting my report late.

Sincerely,



John Conley