## 2007 FOR PROFIT CORPORATION

## May 04, 2007 08:00 A Secretary of State **ANNUAL REPORT** DOCUMENT # P05000039390 TERRY ANN EASTMAN, P.A. Principal Place of Business Mailing Address 6627 MEANDERING WAY 6627 MEANDERING WAY BRADENTON, FL 34202 BRADENTON, FL 34202 04072007 CR2E034 (11/05) No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 90-0228809 Not Applicable \$8,75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE EASTMAN, TERRY 6627 MEANDERING WAY BRADENTON, FL 34202 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable (NOTE; Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be $\Box$ Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME EASTMAN, TERRY U00000760607 STREET ADDRESS 6627 MEANDERING WAY 05/25/07-80020-020 150.00 CITY-ST-ZIP BRADENTON, FL 34202 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 like empowered.

SIGNATURE: <

TITLE NAME STREET ADDRESS CITY-ST-ZIP a TITLE NAME STREET ADDRESS CITY-ST-ZIP

**FILED**