2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P05000042186

1. Entity Name

LISA COPLAN-GARDNER, P.A., ATTORNEY AT LAW



FILED Jan 26, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

804 THIRD STREET

804 THIRD STREET

SUITE C

NEPTUNE BEACH, FL 32266 U

SUITE C NEPTUNE BEACH, FL 32266

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No Chg-P

CR2E034 (11/05)

4. FEI Number 33-1114262 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COPLAN-GARDNER, LISA ESQ. 1308 STRAND STREET NEPTUNE BEACH, FL 32266

DO NOT WRITE 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					
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	000000605106 01/30/07-80022-022 150.00
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, P COPLAN-GARDNER, LISA ESQUIRE 1308 STRAND STREET NEPTUNE BEACH, FL 32266				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COPLAN-GARDNER, LISA ESQUIRE 1308 STRAND STREET NEPTUNE BEACH, FL 32266				
TITLE MAME STREET ADDRESS CITY-S1-ZIP	T, S COPLAN-GARDNER, LISA ESQUIRE 1308 STRAND STREET NEPTUNE BEACH, FL 32266	:		DO	NOT WRITE
TITLE NAME STREET ADORESS CITY- ST- ZIP			•	IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			!		
TITLE NAME STREET ADDRESS		,			

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 frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Blog 1992 Block 11 it changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/07

Daysime Phone #