

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000043645

FILED
May 01, 2007
Secretary of State

Entity Name: KEITH A. FAIRCLOUGH, SR., P.A.

Current Principal Place of Business:

13591 GREENTREE TRAIL
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1133
LOXAHATCHEE, FL 33470

New Mailing Address:

FEI Number: 20-2552052

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAIRCLOUGH, KEITH A
13591 GREENTREE TRAIL
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

FAIRCLOUGH, ADRIAN
13591 GREENTREE TRAIL
WELLINGTON, FL 33414 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: ADRIAN FAIRCLOUGH

05/01/2007

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:

Title: PD () Delete
Name: FAIRCLOUGH, KEITH A
Address: 13591 GREENTREE TRAIL
City-St-Zip: WELLINGTON, FL 33414 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: FAIRCLOUGH, ADRIAN
Address: 13591 GREENTREE TRAIL
City-St-Zip: WELLINGTON, FL 33414 US

Title: VPS () Change (X) Addition
Name: FAIRCLOUGH, SONIA
Address: 13591 GREENTREE TRAIL
City-St-Zip: WELLINGTON, FL 33414

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: ADRIAN FAIRCLOUGH

PD

05/01/2007

Electronic Signature of Signing Officer or Director

Date