



2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 19, 2007 8:00 am
Secretary of State

07-19-2007 90022 022 ***150.00

DOCUMENT # P05000069587					
1. Entity Name GEORGE M GINGO, P.A.					
Principal Place of Business 20842 MARLIN ST ORLANDO, FL 32833 3005 IRWIN AVENUE MIMS, FLORIDA 32754			Mailing Address P.O. BOX 6371 TITUSVILLE, FL 32782-6371		
2. Principal Place of Business - No P.O. Box # 3005 IRWIN AVENUE		3. Mailing Address 3005 IRWIN AVENUE			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07162007 Chg-P CR2E034 (12/06)	
City & State MIMS, FLORIDA		City & State MIMS, FLORIDA		4. FEI Number 20-2846113	
Zip 32754		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GINGO, GEORGE M 2323 SOUTH WASHINGTON AVENUE SUITE 217 TITUSVILLE, FL 32780			7. Name and Address of New Registered Agent Name: George M. Gingo Street Address (P.O. Box Number is Not Acceptable): 3005 IRWIN AVENUE City: MIMS FL Zip Code: 32754		
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: <u>George M. Gingo</u> DATE: <u>7/15/07</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	D GINGO, GEORGE M 20842 MARLIN STREET ORLANDO, FL 32833	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	George M. Gingo 3005 IRWIN AVENUE MIMS, FL 32754	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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 like empowered.					
SIGNATURE: <u>George M. Gingo</u>			Date: <u>7/15/07</u> Daytime Phone #: <u>321-795-5151</u>		