

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000079672

Entity Name: BARBARA E DYER, PA

FILED
Apr 26, 2007
Secretary of State

Current Principal Place of Business:

16947 SE 93RD CUTHBERT CIRCLE
THE VILLAGES, FL 32162

New Principal Place of Business:

680 HAYNESVILLE WAY
THE VILLAGES, FL 32162

Current Mailing Address:

16947 SE 93RD CUTHBERT CIRCLE
THE VILLAGES, FL 32162

New Mailing Address:

680 HAYNESVILLE WAY
THE VILLAGES, FL 32162

FEI Number: 20-2952767

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DYER, BARBARA E
16947 SE 93RD CUTHBERT CIRCLE
THE VILLAGES, FL 32162 US

Name and Address of New Registered Agent:

DYER, BARBARA E
680 HAYNESVILLE WAY
THE VILLAGES, FL 32162 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: BARB DYER

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DYER, BARBARA E
Address: 16947 SE 93RD CUTHBERT CIRCLE
City-St-Zip: THE VILLAGES, FL 32162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DYER, BARBARA E
Address: 680 HAYNESVILLE WAY
City-St-Zip: THE VILLAGES, FL 32162

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: BARB DYER

PRES

04/26/2007

Electronic Signature of Signing Officer or Director

Date