2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000089090

Entity Name: LISA M. NEAL, P.A.

FILED Jul 17, 2006 Secretary of State

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Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
266 TWIN I DESTIN, FI	LAKE DRIVE L 32541		266 TWIN LAKES LAN DESTIN, FL 32541	IE	
Current Ma	ailing Addres	s:	New Mailing Address	New Mailing Address:	
266 TWIN I DESTIN, FI	LAKE DRIVE L 32541		266 TWIN LAKES LAN DESTIN, FL 32541	IE	
FEI Number:	20-3032440	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
The above	M BLVD E, FL 32578 named entity s of Florida.	US submits this statement for the p	purpose of changing its registered	d office or registered agent, or both,	
		ic Signature of Registered Age	ent	Date	
Election Carr		3(2)(b), F.S., the corporation did no ; Trust Fund Contribution (). TORS:	·	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	V () NEAL, LISA M 266 TWIN LAKI DESTIN, FL 32		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () NEAL, CORY 266 TWIN LAKI DESTIN, FL 32		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: LISA NEAL V 07/17/2006