

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000091451

FILED
Jun 04, 2007
Secretary of State

Entity Name: ACTION FAMILY LAW PRACTICE, P.A.

Current Principal Place of Business:

1128 ROYAL PALM BEACH BLVD., SUITE 231
ROYAL PALM BEACH, FL 33411

New Principal Place of Business:

1128 ROYAL PALM BEACH BLVD.
SUITE 231
WEST PALM BEACH, FL 33411

Current Mailing Address:

1128 ROYAL PALM BEACH BLVD., SUITE 231
ROYAL PALM BEACH, FL 33411

New Mailing Address:

1128 ROYAL PALM BEACH BLVD.
SUITE 231
WEST PALM BEACH, FL 33411

FEI Number: 47-0956588

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEVENS, CARI M
1128 ROYAL PALM BEACH BLVD., SUITE 231
ROYAL PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

STEVENS, CARI M
1128 ROYAL PALM BEACH BLVD.
SUITE 231
WEST PALM BEACH, FL 33411 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: CARI M STEVENS

06/04/2007

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: PFST () Delete
Name: STEVENS, CARI M
Address: 1128 ROYAL PALM BEACH BLVD., SUITE 231
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D () Delete
Name: STEVENS, CARI M
Address: 1128 ROYAL PALM BEACH BLVD., SUITE 231
City-St-Zip: ROYAL PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PFST (X) Change () Addition
Name: STEVENS, CARI M
Address: 1128 ROYAL PALM BEACH BLVD., SUITE 231
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D (X) Change () Addition
Name: STEVENS, CARI M
Address: 1128 ROYAL PALM BEACH BLVD., SUITE 231
City-St-Zip: WEST PALM BEACH, FL 33411

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: CARI M STEVENS

PRES

06/04/2007

Electronic Signature of Signing Officer or Director

Date