2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000097899

1. Entity Name

ATWELL & ASSOCIATES, INC.



FILED Apr 02, 2007 08:00 AM Secretary of State

Principal Place of Business

5552 E HARBOR DR FRUITLAND PARK, FL 34731 Mailing Address

5552 E HARBOR DR FRUITLAND PARK, FL 34731



DO NOT WRITE IN THIS SPACE

01222007 No Chg-P

CR2E034 (11/05)

4. FEI Number 20-3145810

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ATWELL, KAY E 5552 E HARBOR DR FRUITLAND PARK, FL 34731

TITLE NAME STREET ADDRESS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the p	urpose of changing its regist	ered office or r	egistered agent, or bo	oth, in the State of Florida. La	am familiar with, and accept	
the obligat	ions of registered agent. Signature, typed or printed name of registered agent and title is	applicable (NOTE: Regis	tered Agent signature	a required when reinstating)	- DAT	· · · · · · · · · · · · · · · · · · ·	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Fir Trust Fund Contribution	·	\$5.00 May Be Added to Fees	00000068487 04/06/07-80030		
10. OFFICERS AND DIRECTORS				49 7 77			
TITLE NAME STREET ADDRESS CITY-SI-ZIP	P ATWELL, KAY E 5552 E HARBOR DR FRUITLAND PARK, FL 34731						
TITLE NAME STREET ADDRESS CITY-ST-ZIP							

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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: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING DEFICER OF DIRECT

<u>/ 3/30/0</u>

~352-314-2524 Dayling Phone \$