


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jul 31, 2007 8:00 am**  
**Secretary of State**

07-31-2007 90007 010 \*\*\*150.00

<b>DOCUMENT # P05000099551</b>	
1. Entity Name <b>R NORMAN ASSOCIATES, INC.</b>	

Principal Place of Business <b>11903 S.W. 12 TH CT DAVIE FL 33325</b>	Mailing Address <b>11903 S.W. 12 TH CT DAVIE FL 33325</b>
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2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.	3. Mailing Address  Suite, Apt. #, etc.
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2nd MOORE CR2E034 (4/07)

City & State	City & State
Zip	Country

4. FEI Number <b>20-3191083</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>TOME, JAY R 8300 NW 53 ST SUITE 300 MIAMI FL 33166</b>	
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7. Name and Address of New Registered Agent Name <b>Leslie Auerbach Lewis, Esq</b> Street Address (P.O. Box Number is Not Acceptable) <b>1936 Lee Rd</b> <b>Suite 280</b> City <b>Winter Park</b> FL Zip Code <b>32789</b>	
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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 <b>Leslie Auerbach Lewis</b> DATE <b>July 25, 2007</b> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	
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**FILE NOW!!! FEE IS \$550.00**  
**DUE BY September 5, 2007**  
**Make Check Payable to Florida Department of State**

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>P.S. JORDAN, RALEIGH N 11903 SW 12 CT DAVIE FL 33325</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: <b>Leslie Auerbach Lewis</b>	305-3335649
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date Daytime Phone #</small>



40127650

July 27, 2007

Division of Corporations  
Annual Report Section  
P.O. Box 6850  
Tallahassee, Florida 32314

Re: *R. Norman Associates, Inc.*  
*Document #P05000099551*

Gentlemen:

Enclosed please find our client's 2007 For Profit Corporation Annual Report. Please note that Pursuant to Florida Statute §607.193(2)(b) the late fee of \$400.00 is waived due to the fact that the corporation has certified that it did not receive prior notice. Enclosed please find our firm check No. 7991 in the amount of \$150.00 as payment of the applicable filing fee.

If you have any questions regarding this or any other matter please do not hesitate to contact me at the address and number shown below.

Sincerely,

*Carolyn S. Crichton*  
Carolyn S. Crichton, Esq.

Enclosure  
Cc: Raleigh N. Jordan