2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000103357

Entity Name: DE LA RUE, MERCER, SMITH, & KELLY, P.A.

FILED May 01, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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37206 CLINTON AVENUE DADE CITY, FL 33525

Current Mailing Address: New Mailing Address:

37206 CLINTON AVENUE DADE CITY, FL 33525

FEI Number: 20-3244372 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DELA RUE, GREGORY B
37206 CLINTON AVENUE
DADE CITY, FL 33525 US

DE LA RUE, GREGORY B
37206 CLINTON AVENUE
DADE CITY, FL 33525 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: GREGORY DE LA RUE 05/01/2006

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: SMITH, JOAN Name: DE LA RUE, GREGORY B

Address: 12632 OAK HOLLOW COURT Address: PO BOX 736

City-St-Zip: DADE CITY, FL 33525 City-St-Zip: SAN ANTONIO, FL 33576

Title: V () Delete Title: () Change () Addition Name: MERCER, NEWTON L Name:

 Address:
 PO BOX 431
 Address:

 City-St-Zip:
 DADE CITY, FL 33526
 City-St-Zip:

Title: S () Delete Title: S (X) Change () Addition

Name: KELLY, THERESA S Name: MERCER, NEWTON L

Address: 12636 TRADITION DRIVE Address: PO BOX 431

City-St-Zip: DADE CITY, FL 33525 City-St-Zip: DADE CITY, FL 33526

Title: T () Delete Title: T (X) Change () Addition

Name: DELA RUE, GREGORY B
Address: PO BOX 736
Name: DE LA RUE, GREGORY B
Address: PO BOX 736
PO BOX 736

City-St-Zip: SAN ANTONIO, FL 33576 City-St-Zip: SAN ANTONIO, FL 33576

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: GREGORY DE LA RUE P 05/01/2006