


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90447 012 ***150.00

DOCUMENT # P05000143860

1. Entity Name
WILLIAM TERRY, P.A.



Principal Place of Business
**9394 SE 77TH AVE., F-7
 MIAMI, FL 33156**

Mailing Address
**9394 SE 77TH AVE., F-7
 MIAMI, FL 33156**

00015001



2. Principal Place of Business
Pinecrest II, Ste 220

3. Mailing Address
Pinecrest II, Ste 220

Suite, Apt. #, etc.
7685 SW 104th St.

Suite, Apt. #, etc.
7685 SW 104th St.

04182006 Chg-P CR2E034 (11/05)

City & State
Miami FL

City & State
Miami, FL

4. FEI Number
13-4313278

Applied For
 Not Applicable

Zip
33156

Country
None

Zip
33156

Country
None

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**DURKEE, DAVID ESQ
 2900 MIDDLE ST.
 7TH FLOOR
 COCONUT GROVE, FL 33133**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 *Big Terry* DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TERRY, WILLIAM 9394 SE 77TH AVE., F-7 MIAMI, FL 33156 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: *Big Terry (William Terry)* DATE 4/19/06 (305)248-9000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #