

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000162999

FILED
Apr 23, 2006
Secretary of State

Entity Name: ADRIENNE E. TRENT, P.A.

Current Principal Place of Business:

836 EXECUTIVE LANE
SUITE 120
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

1619 CLOVER CIRCLE
MELBOURNE, FL 32935

New Mailing Address:

836 EXECUTIVE LANE
SUITE 120
ROCKLEDGE, FL 32955

FEI Number: 20-3934801

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRENT, ADRIENNE E
1619 CLOVER CIRCLE
MELBOURNE, FL 32935 US

Name and Address of New Registered Agent:

TRENT, ADRIENNE E
836 EXECUTIVE LANE
SUITE 120
ROCKLEDGE, FL 32955 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:

04/23/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TRENT, ADRIENNE E
Address: 1619 CLOVER CIRCLE
City-St-Zip: MELBOURNE, FL 32935

Title: P () Delete
Name: TRENT, ADRIENNE E
Address: 1619 CLOVER CIRCLE
City-St-Zip: MELBOURNE, FL 32935

Title: TREA () Delete
Name: TRENT, ADRIENNE E
Address: 1619 CLOVER CIRCLE
City-St-Zip: MELBOURNE, FL 32935

Title: SECT () Delete
Name: TRENT, ADRIENNE E
Address: 1619 CLOVER CIRCLE
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TRENT, ADRIENNE E
Address: 836 EXECUTIVE LANE
City-St-Zip: ROCKLEDGE, FL 32955

Title: P (X) Change () Addition
Name: TRENT, ADRIENNE E
Address: 836 EXECUTIVE LANE
City-St-Zip: ROCKLEDGE, FL 32955

Title: TREA (X) Change () Addition
Name: TRENT, ADRIENNE E
Address: 836 EXECUTIVE LANE
City-St-Zip: ROCKLEDGE, FL 32955

Title: SECT (X) Change () Addition
Name: TRENT, ADRIENNE E
Address: 836 EXECUTIVE LANE
City-St-Zip: ROCKLEDGE, FL 32955

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: ADRIENNE E. TRENT

P

04/23/2006

Electronic Signature of Signing Officer or Director

Date