

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000163667

Entity Name: GINA BYRD, CPA, PA

FILED
May 03, 2006
Secretary of State

Current Principal Place of Business:

3402 HAWKIN DRIVE
KISSIMMEE, FL 34741 US

Current Mailing Address:

3402 HAWKIN DRIVE
KISSIMMEE, FL 34741 US

New Principal Place of Business:

3395 W. VINE STREET
301
KISSIMMEE, FL 34741 US

New Mailing Address:

3402 HAWKIN DRIVE
KISSIMMEE, FL 34746 US

FEI Number: 20-4028682

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BYRD, GINA O
3402 HAWKIN DRIVE
KISSIMMEE, FL 34746 US

Name and Address of New Registered Agent:

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:

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:

Title: D () Delete
Name: BYRD, GINA O
Address: 3402 HAWKIN DRIVE
City-St-Zip: KISSIMMEE, FL 34746 US

Title: D () Delete
Name: BYRD, DANIEL G
Address: 3402 HAWKIN DRIVE
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BYRD, GINA O
Address: 3402 HAWKIN DRIVE
City-St-Zip: KISSIMMEE, FL 34746 US

Title: VP (X) Change () Addition
Name: BYRD, DANIEL G
Address: 3402 HAWKIN DRIVE
City-St-Zip: KISSIMMEE, FL 34746

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: GINA BYRD

P

05/03/2006

Electronic Signature of Signing Officer or Director

Date