

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 16, 2007 8:00 am**  
**Secretary of State**

01-16-2007 90215 045 \*\*\*150.00

60001480



01102007 Chg-P CR2E034 (12/06)

<b>DOCUMENT # P06000002642</b> 1. Entity Name <b>LAW OFFICE OF VICKI L. SHORT, P.A.</b>																													
Principal Place of Business <b>207 ORANGE AVENUE SUITE C FT. PIERCE, FL 34950</b>			Mailing Address <b>207 ORANGE AVENUE SUITE C FT. PIERCE, FL 34950</b>																										
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.																											
City & State  Zip      Country		City & State  Zip      Country		4. FEI Number <b>84-1700357</b> <div style="float: right;"> <input type="checkbox"/> Applied For  <input type="checkbox"/> Not Applicable         </div>																									
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required				6. Name and Address of Current Registered Agent  <b>SHORT, VICKI L 207 ORANGE AVENUE, SUITE C FT. PIERCE, FL 34950</b>																									
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-stating)</small>																									
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																											
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">P SHORT, VICKI L</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">2691 E. OAKLAND PARK BLVD., SUITE 402</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">FT. LAUDERDALE, FL 33306</td> </tr> </table>			TITLE	P SHORT, VICKI L	<input type="checkbox"/> Delete	NAME			STREET ADDRESS	2691 E. OAKLAND PARK BLVD., SUITE 402		CITY-ST-ZIP	FT. LAUDERDALE, FL 33306		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">P SHORT, VICKI L</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/> Change    <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">207 ORANGE AVENUE, SUITE C</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">FT. PIERCE, FL 34950</td> </tr> </table>			TITLE	P SHORT, VICKI L	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS	207 ORANGE AVENUE, SUITE C		CITY-ST-ZIP	FT. PIERCE, FL 34950	
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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.																													
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<div style="text-align: right;"> <b>1/10/07</b>      <b>772-468-7005</b>  <small>Date      Daytime Phone #</small> </div>																									