

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000013337

Entity Name: JON LAMBE, P.A.

FILED
Feb 05, 2007
Secretary of State

Current Principal Place of Business:

127 WEST CHURCH STREET
SUITE 330
ORLANDO, FL 32801

New Principal Place of Business:

78 WEST CHURCH STREET
SUITE 130
ORLANDO, FL 32801

Current Mailing Address:

127 WEST CHURCH STREET
SUITE 330
ORLANDO, FL 32801

New Mailing Address:

78 WEST CHURCH STREET
SUITE 130
ORLANDO, FL 32801

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMBE, JON L
127 WEST CHURCH STREET
SUITE 330
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

LAMBE, JON L
78 WEST CHURCH STREET
SUITE 130
ORLANDO, FL 32801 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: /JON LAMBE/

02/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LAMBE, JON
Address: 127 WEST CHURCH STREET, STE 330
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LAMBE, JON
Address: 78 WEST CHURCH STREET, STE 130
City-St-Zip: ORLANDO, FL 32801

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: /JON LAMBE/

P

02/05/2007

Electronic Signature of Signing Officer or Director

Date