## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000017500

Entity Name: DUERR & CULLEN, CPAS, PA

## **FILED** Apr 25, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Princip	pal Place of Business:	New Principal Place of Business

380 S STATE RD 434 SUITE 1004 #272 158 LOOKOUT PLACE ALTAMONTE SPRINGS, FL 32714

SUITE 102

MAITLAND, FL 32751

**Current Mailing Address: New Mailing Address:** 

380 S STATE RD 434 SUITE 1004 #272 158 LOOKOUT PLACE ALTAMONTE SPRINGS, FL 32714 SUITE 102

MAITLAND, FL 32751

FEI Number: 20-4421515 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CULLEN, JOHN E CULLEN, JOHN E 13132 FÓX GROVE STREET

13132 FÓX GLOVE STREET WINTER GARDEN, FL 34787 US WINTER GARDEN, FL 34787 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: 04/25/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: ( ) Delete Title: (X) Change ( ) Addition

DUERR, CHRISTOPHER R DUERR, CHRISTOPHER R Name: Name:

380 S STATE RD 434 SUITE 1004 #272 Address: 960 GRANT RD Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: TITUSVILLE, FL 32780

( ) Delete Title: Title: (X) Change ( ) Addition

Name: CULLEN, JOHN E Name: CULLEN, JOHN E

380 S STATE RD 434 SUITE 1004 #272 Address: 13132 FOX GLOVE STREET Address: ALTAMONTE SPRINGS, FL 32714 WINTER GARDEN, FL 34787 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CHRISTOPHER R. DUERR 04/25/2007 D

Electronic Signature of Signing Officer or Director

Date