

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000018682

FILED
Jan 15, 2007
Secretary of State

Entity Name: LAW OFFICE OF NICOLE K. HABL, P.A.

Current Principal Place of Business:

P.O. BOX 50855
JACKSONVILLE, FL 32240

New Principal Place of Business:

333 FIRST ST. NORTH STE # 305
JACKSONVILLE, FL 32250

Current Mailing Address:

P.O. BOX 50855
JACKSONVILLE, FL 32240

New Mailing Address:

333 FIRST ST. NORTH STE# 305
JACKSONVILLE, FL 32250

FEI Number: 20-4229878

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HABL, NICOLE K
119 MARGARET ST
NEPTUNE BEACH, FL 32266 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HABL, NICOLE K
Address: 119 MARGARET ST
City-St-Zip: NEPTUNE BEACH, FL 32266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NICOLE K HABL

PRES

01/15/2007

Electronic Signature of Signing Officer or Director

Date