


2007 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 26, 2007 8:00 am
Secretary of State

03-14-2007 90033 003 ***150.00

DOCUMENT # P06000022054 1. Entity Name MICHELLE MAE EDDY, P.A.					
Principal Place of Business 5530 NW 38TH TERRACE COCONUT CREEK, FL 33073			Mailing Address 5530 NW 38TH TERRACE COCONUT CREEK, FL 33073		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 20-4347014	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent EDDY, MICHELLE 5530 NW 38TH TERRACE COCONUT CREEK, FL 33073				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EDDY, MICHELLE 5530 NW 38TH TERRACE COCONUT CREEK, FL 33073	<input type="checkbox"/> Delete			
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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 to an address, with all other like empowered.					
SIGNATURE: <i>Michelle Eddy</i>		3/3/07		954-296-0322	
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR					