

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000078478

FILED  
Jan 25, 2007  
Secretary of State

Entity Name: NORM & FRANK PROFESSIONAL SERVICES, INC.

## Current Principal Place of Business:

1431 S. GRANT STREET  
LONGWOOD, FL 32750 US

## New Principal Place of Business:

## Current Mailing Address:

1431 S. GRANT STREET  
LONGWOOD, FL 32750 US

## New Mailing Address:

FEI Number: 56-2591365

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MATEER & HARBERT, P.A.  
225 E. ROBINSON STREET  
SUITE 600  
ORLANDO, FL 32801 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: WILKINSON, NORMAN  
Address: 1431 S. GRANT STREET  
City-St-Zip: LONGWOOD, FL 32750 US

Title: VP ( ) Delete  
Name: PATTERSON, FRANK  
Address: P.O. BOX 150022  
City-St-Zip: ALTAMONTE SPRINGS, FL 32715 US

Title: T ( ) Delete  
Name: WILKINSON, NORMAN  
Address: 1431 S. GRANT STREET  
City-St-Zip: LONGWOOD, FL 32750 US

Title: S ( ) Delete  
Name: PATTERSON, FRANK  
Address: P.O. BOX 150022  
City-St-Zip: ALTAMONTE SPRINGS, FL 32715 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: NORMAN WILKINSON

PRES

01/25/2007

Electronic Signature of Signing Officer or Director

Date