

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000089854

FILED  
Feb 19, 2007  
Secretary of State

Entity Name: DEAN NORMAN CONSULTING, INC.

## Current Principal Place of Business:

1428 NANTAHALA BEACH ROAD  
GULF BREEZE, FL 32563 US

## New Principal Place of Business:

## Current Mailing Address:

1428 NANTAHALA BEACH ROAD  
GULF BREEZE, FL 32563 US

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

NORMAN, WILLIAM  
1428 NANTAHALA BEACH ROAD  
GULF BREEZE, FL 32563 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: PVST ( ) Delete  
Name: NORMAN, WILLIAM  
Address: 1428 NANTAHALA BEACH ROAD  
City-St-Zip: GULF BREEZE, FL 32563 US

Title: D ( ) Delete  
Name: NORMAN, WILLIAM  
Address: 1428 NANTAHALA BEACH ROAD  
City-St-Zip: GULF BREEZE, FL 32563 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: WILLIAM NORMAN

P

02/19/2007

Electronic Signature of Signing Officer or Director

Date