## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P06000141642

**EXECUTIVE CONSULTANTS, INC.** 



## FILED Aug 20, 2007 8:00 am Secretary of State 08-20-2007 90057 005 \*\*\*150.00

Principal Place of Business   S783 SE 87TH ST   COULT   34472   COULT   3447	ļ				TASK.			
2. Principal Place of Businesses - No P.O. Box #	Principal Plac	ce of Business	Mailing Address	<del></del> -				
2. Principal Place of Business No P.O. Box 8   3. Mailing Address   5.78.3 S.E. 8.7 B.S.   5.7 S.   5. Suite, Apr. 8, etc.   5.19.3 S.E. 8.7 B.S.   5. Suite, Apr. 8, etc.   5.19.4 S.E.   5.7 B.S.   5. Suite, Apr. 8, etc.			6783 SE 87TH ST		1	•		
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Suite, April #, etc.    Suite, April #, etc.   Suite, April #, etc.   O7012007 Chg-P CR2E034 (12/06)				PM -				
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Application   Country   25   Count	Julie, Apr.	. π, <del>οι</del> σ.	Suite, Apr. #, etc.		07012007	Chg-P	CR2E034 (12/06	)
Zo	l a la						. —	
6. Name and Address of Correct Registered Agent  T. Name and Address of Name Registered Agent  T. Name and Address of Name Registered Agent  T. Name and Address of Name 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 acceptable or registered agent, or both, in the State of Florida. I am familiar with, and acceptable or registered agent.  FILE MOWITI FEE 18 3 150.00  Date by September 14, 2007  B. Election Comprision.  FILE MOWITI FEE 18 3 150.00  Date by September 14, 2007  Date by September 14, 2007  B. Election Comprision.  TITLE  NAME  CITY ST.79  COPTIONS OFFICERS AND DIRECTORS  TITLE  NAME  STRET ADDRESS  CITY ST.79  COALA, FL 34472  CITY ST.79						5931054		
Community   Comm	i — '	2 MARION	1 - 1		5. Certificate	e of Status Desired		
EVDA, MARVIN F 6783 SE 87TH ST OCALA, FL 34472  8. The above named antity submits this statement for the purpose of changing its registered allice or registered agent, or both, in the State of Florida. I am territian with, and acc the obligations of registered agent.  SIGNATURE  FILE NOWITI FEE IS \$150.00  Due by September 14, 2007  P. Deciden Campaign Financing DP OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE NAME LEYDA, MARVIN F STRET MORESS CITY-ST-2P  TITLE NAME LEYDA, GLORIA J STRET MORESS CITY-ST-2P  TITLE NAME STRET MOR		6. Name and Address of Current	Registered Agent		7. Name an	d Address of New R	egistered Agent	
STREET ADDRESS CRYTH ST OCALA, FL 34472  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 agent, or both, in the State of Rorida. Tam familiar with, and acceptable of the obligations of registered agent.  SIGNATURE  FILE NOWILL Fixed a \$150.00  Due by September 14, 2007  TILE  NAME  STREET ADDRESS CITY-ST-7P  DST  CALA, FL 34472  Delde  TILE  NAME STREET ADDRESS CITY-ST-7P  Delde  TILE NAME STREET ADDRESS CITY-ST-7P  Delde  TILE NAME STREET ADDRESS CITY-ST-7P  Delde  TILE NAME STREET ADDRESS CITY-ST-7P  Delde  TILE NAME STREET ADDRESS CITY-ST-7P  Delde  TILE NAME STREET ADDRESS CITY-ST-7P  Delde  TILE NAME STREET ADDRESS CITY-ST-7P  Delde  TILE NAME STREET ADDRESS CITY-ST-7P  Delde  TILE NAME STREET ADDRESS CITY-ST-7P  Delde  TILE NAME STREET ADDRESS CITY-ST-7P  Delde TILE NAME STREET ADDRESS CITY-ST-7P  Delde TILE NAME STREET ADDRESS CITY-ST-7P  Delde TILE NAME STREET ADDRESS CITY-ST-7P  Delde TILE NAME STREET ADDRESS CITY-ST-7P  Delde TILE NAME STREET ADDRESS CITY-ST-7P  TILE NAME STREET ADDRESS CITY-ST-7P  TILE NAME STREET ADDRESS CITY-ST-7P  Delde TILE NAME STREET ADDRESS CITY-ST-7P  TILE NAME STREET ADDRESS CI	I FYDA M	IARVIN F		Name				
8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Floride. Tam termities with, and acc the obligations of registered agent or rest remains agent and title a applicable.    SIGNATURE	6783 SE 8	STH ST	Street Add	Street Address (P.O. Box Number is Not Acceptable)				
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agent.  SIGNATURE  Signature, types or pursed were of requirement agent and this is accidable.  PRILE NOWITH FEE IS \$150.00  Due by September 14, 2007  P. Election Campaign Financing.  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.  TITLE  LEYDA, MARVIN F  6783 SE 87TH ST  OCALA, FL 34472  TITLE  DDST  LEYDA, GLORIA J  6783 SE 87TH ST  OCALA, FL 34472  TITLE  MAKE  STREET ADDRESS  CITY. ST. 7P  TITLE  MAKE  STREET ADDRESS  CITY. ST. 7P  Delete  TITLE  MAKE  STREET ADDRESS  CITY. ST. 7P  TITLE  MAKE  STREET ADDRESS  STRE	OCALA, F	L 34472		<del></del>	<del></del>	· · · · · · · · · · · · · · · · · · ·		
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Trust Fund Contribution. Added to Fees corporation did not receive the prior notice.  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.  TITLE DP LEYDA, MARVIN F	٠,	Signature, typed or printed name of registered agent a	ind title II applicable. (NOTE: F	Registered Agent signature	e required when reinstating)		DATE	
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<sup>12.</sup> 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 informati 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 direct 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 changed, or on an attachment with an address, with all other like empowered.