


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 10, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P09977**  
 1. Entity Name  
**LARRY MAYER & COMPANY**



Principal Place of Business <b>1950 N ELSTON AVE                  #200                  CHICAGO, IL 60622 US</b>	Mailing Address <b>1950 N ELSTON AVE                  #200                  CHICAGO, IL 60622 US</b>
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**DO NOT WRITE IN THIS SPACE**



03222006 No Chg-P CR2EQ34 (11/05)

4. FEI Number <b>36-3398568</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
**MAYER, LARRY  
 7135 VALENCIA DRIVE  
 BOCA RATON, FL 33433**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MAYER, LARRY 7135 VALENCIA DRIVE BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BRODER, DONNA R. 1950 N ELSTON AVE #200 CHICAGO, IL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MAYER, JEFFREY W. 1950 N ELSTON AVE #200 CHICAGO, IL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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 04/25/06-00050-025 150.00

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 with an address, with another like empowered.

SIGNATURE: Larry Mayer, President Date: 3/30/06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #