2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 12, 2006 08:00 AM Secretary of State **DOCUMENT # P93000038435** 1. Entity Name VAN HOUTEN, PONDER & HAHL, P.A. Principal Place of Business Mailing Address 114 S PALMETTO AVE. 114 S PALMETTO AVE. DAYTONA BEACH, FL 32114 DAYTONA BEACH, FL 32114 US 01032006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4, FEI Number Applied For 59-3188140 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PONDER, STEPHEN R DO NOT WRITE 114 S PALMETTO AVE DAYTONA BEACH, FL 32114 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, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. П Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME PONDER, STEPHEN R STREET ADDRESS 114 S PALMETTO AVE CITY-ST-ZIP DAYTONA BCH., FL TITLE NAME HAHL, JAMES G STREET ADDRESS 114 S. PALMETTO AVE CITY-ST-ZIP DAYTONA BEACH, FL 32114 TIME NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7/P TITLE NAME

I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplemental reports 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 ampowered 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 all other like empowered.

SIGNATURE:

STREET ADDRESS CRY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-7IP

NAME OF SIGNING OFFICER OR DIRECTOR

1/5/06

(386) 257-1777

Daytime Phone #