

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000083116

Entity Name: SUSAN CONLEY, C.P.A., P.A.

FILED  
Mar 03, 2006  
Secretary of State

**Current Principal Place of Business:**

5741 NE 19 TER  
FT LAUDERDALE, FL 33308

**New Principal Place of Business:**

6301 NW 5TH WAY  
STE 4500  
FT LAUDERDALE, FL 33309

**Current Mailing Address:**

5741 NE 19 TER  
FT LAUDERDALE, FL 33308

**New Mailing Address:**

6301 NW 5TH WAY  
SUITE 4500  
FT LAUDERDALE, FL 33309

FEI Number: 65-0453937

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CONLEY, SUSAN  
5741 NE 19 TERR  
FORT LAUDERDALE, FL 33308 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: PD ( ) Delete  
Name: CONLEY, SUSAN  
Address: 5741 NE 19 TERR  
City-St-Zip: FORT LAUDERDALE, FL 33308

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: SUSAN D CONLEY

PRES

03/03/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date