2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2007
Secretary of State

DOCUMENT# P93000084250

Entity Name: CAROL A. VANCE, CPA, JD, P.A.

Current Principal Place of Business:

411 55TH AVE
SAINT PETERSBURG BEACH, FL 33706 US

New Principal Place of Business:

Current Mailing Address:

411 55TH AVENUE
ST. PETERSBURG BEACH, FL 33706 US

New Mailing Address:

FEI Number: 59-3213817 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VANCE, CAROL A
411 55TH AVE
SAINT PETERSBURG BEACH, FL 33706 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:	P	( ) Delete
Name:	VANCE, CAROL A	
Address:	411 55TH AVE	
City-St-Zip:	SAINT PETERSBURG BEACH, FL 33706	
Title:	VP	( ) Delete
Name:	LIKENS, MELINDA	
Address:	1221 BRUCE B DOWNS BLVD #175	
City-St-Zip:	WESLEY CHAPEL, FL 33543	
Title:	VP	( ) Delete
Name:	VELAR, MARI JO	
Address:	6907 ARABIAN ROAD	
City-St-Zip:	ODESSA, FL 33556	
Title:	VP	( ) Delete
Name:	LENCE, M. ELAINE	
Address:	11720 FOREST HILLS DRIVE	
City-St-Zip:	TAMPA, FL 33612	
Title:	VP	( ) Delete
Name:	ANDREWS, PAMELA B	
Address:	P.O. BOX 1018	
City-St-Zip:	INDIAN ROCKS BEACH, FL 33785	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: CAROL A. VANCE P 03/06/2007

Electronic Signature of Signing Officer or Director Date